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A Social Media Policy for Clinical Mental Health Counseling Programs

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A Social Media Policy for Clinical Mental Health Counseling Programs

Abstract

The American Counseling Association 2014 Ethical Code mandates that counselors who engage in social media communication develop knowledge and skills related to ethical and legal considerations (American Counseling Association, 2014). In response to these expectations, this article introduces a social media policy created by faculty in a Clinical Mental Health Counseling program. An example and review of an implemented social media policy is provided, along with guidelines for a student-led training program. Case examples are provided that illustrate potential dilemmas of student misuse of social media, along with examples of faculty interventions. This article is designed to contribute to the professional discourse on how to address social media and technology in counselor training.

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A Social Media Policy for Clinical Mental Health Counseling Programs

Mobile device and social media use has continued to surge over the last decade. Smartphone ownership has increased by 35% since 2011 (Anderson, 2015). There has been nearly a ten-fold increase in the use of social media in the last decade (Perrin, 2015). The creation of Facebook in 2004 revolutionized social and networking behaviors. As of the third quarter of 2018, Facebook had 2.27 billion monthly active users worldwide (Statista, 2018). Jobvite, a company that designs recruiting software, found that 93% of recruiters will review a candidate's social profile before making a hiring decision (Jobvite, 2014). In addition, it is common practice for employers to scrutinize candidates pre- and post-interview and to inspect potential candidates through social media. According to Jobvite, 55% percent of recruiters have negatively reconsidered a candidate based on their social profile.

Many current counseling students belong to the first generation to live their entire lives using social media (Erickson, 2008; Lehavot, Barnett, & Powers, 2010). This generation has been identified as the "Y" generation, the "N" or Net-generation, or the "D" or Digital-generation. Prensky (2001) contended that the members of this generation are best labeled as "digital natives" (p. 1). Digital natives are identified as recent generations who have utilized social media throughout their lifespan. Although they are typically fluent and comfortable with electronic forms of communication, they may not always discern the extended consequences of social media behaviors. Despite the ubiquitous nature of social media and, through its use, the potential to adversely affect career attainment and adherence to professional standards, neither etiquette nor ethics training of users can be assumed.

Counseling students may not fully identify the consequences of sharing material online or the implications of third-party agreements to share client records (Natwick, 2017). Even

counseling students, similar to the general public, who believe they have a solid awareness of their social media risks, cannot anticipate how their content may be exploited by other entities. In March of 2018, media reports identified that a political consulting firm “misused the private information of tens of millions of Facebook users” (Dance, Confessore, & LaForgia, 2018). This is an example of how counselors who use social media may experience unintended consequences by being unwitting victims of social media misuse. Regarding the 2018 Facebook violation, “a privacy researcher at the University of California, Berkeley, who studies the security of mobile [applications explained]: ‘the problem is that as more and more data is collected on the device — and if it can be accessed by [applications] on the device — it creates serious privacy and security risks’” (Dance, et al., 2018). It may be difficult for social media users to access all the information needed to adequately assess risk. Therefore, the use of social media can pose consequences that are difficult for users to anticipate.

Graduate students may not have considered how the nuances and complexities of their social media decisions warrant scrutiny as a counselor trainee and, thereafter, as a professional. Individuals may enter a professional training program with some awareness about personal safety and social media. However, social media use within a professional counselor setting introduces a larger context for scrutiny and ethical consideration.

Members of earlier generations, who have integrated electronic forms of communication and technology, were labeled by Prensky (2001) as “digital immigrants” (p. 2). They typically have a more limited understanding of social media than digital natives, yet, they may be supervisors of digital natives (Lehavot et al., 2010). Kolmes (2012) suggested that digital immigrants “do not always fully perceive the nuances of digital culture” (p. 606). Therefore, supervisors may not always be aware of the implications of social media misuse (Campbell et al.,

2016). There also may be differences between digital natives and digital immigrants in what they consider to be appropriate social media use (Kolmes, 2012). We contend that many counselors-in-training are challenged developmentally to emerge from a peer-oriented, student world to an adult-oriented professional role. These generational differences can introduce more complexity to the goal of providing solid guidance and sound policy for counseling students.

In this social media-imbued environment, where most counselors and clients have constant access to their mobile devices and social media, counseling students and counselor educators are expected to manage their professional as well as their personal social media interactions in a manner that is congruent with their roles as professional counselors (American Counseling Association, 2014a). Zur and Donner (2009) described “the Google Factor” as the way that the Internet has permanently altered the nature of self-disclosure, a phenomenon that has “broad implications to [therapists’] professional and personal lives” (p. 23). The internet and social media, in particular, have exposed the, largely unavoidable, overlap between a therapist’s online personal and professional presence (Kolmes & Taube, 2016; Lehavot et al., 2010; Zur & Donner, 2009). Therapists are cautioned that this transparency, created through the availability of online personal information, may have unintended consequences for relationships with clients (Kolmes & Taube, 2016; Lehavot et al., 2010; Zur & Donner, 2009). “The number of potential dilemmas is endless. One thing, perhaps, is for certain: the Internet has redefined the process of self-disclosure” (Lehavot et al., 2010, p. 160). Researchers noted that electronic communications present new challenges to personal privacy.

In more specific detail, Zur, Williams, Lehavot, and Knapp (2009) described unavoidable and accidental online self-disclosures as well as six levels of exploration or inquiry at which clients could obtain information about their therapist. These include review of professional

websites, Internet searches, joining social networks using a pseudonym, joining a listserv or chatroom, and paying for legal or illegal background checks. This “Google Factor” adds significant complexity to the challenge of counselor educators to advise students in their social media interactions. Zur, et al. (2009) concisely stated the need for increased attention to this current professional issue.

These students have grown up with the Internet, and making online personal disclosures is part of the social fabric of their everyday life. This activity is so automatic that students may need support in examining their online activity thoughtfully through a clinical lens. Thus, training programs need to provide students with guidance in considering how their online activity intersects with their professional role as psychologists (p. 29).

Similarly, the scope of the challenge to counseling students and counselor educators is significant and warrants attention in the counselor education and supervision literature.

The counseling profession acknowledged the ethical implications of electronic communication and technology in the current revision of the Code of Ethics and standards (American Counseling Association, 2014a). The American Counseling Association (ACA) 2014 Code of Ethics included a new section on distance counseling, technology, and social media. In fact, references to social media and technology are infused throughout the entire code. Section H mandated that counselors who engage in social media communication develop knowledge and skills related to ethical and legal considerations (American Counseling Association, 2014a). Protection of client rights is at the core of the Code of Ethics mandate to maintain professional boundaries in technology use. It is clearly the counselor’s responsibility to safeguard client privacy and confidentiality and to monitor professional and personal boundaries when using social media or other technology.

Counselor educators are responsible to train students to be competent in their personal and professional use of social media and electronic communications. ACA ethics specialist, Michelle Wade stated that counselor educators are obligated to discuss students' personal use of social media and related issues regarding confidentiality (American Counseling Association, 2014b). As with all other sections of the code, students are expected to adhere to the same standards as professional counselors.

Therefore, counselor educators may be challenged to provide training and guidance to students regarding the use of social media. Few published resources assist counselor educators with this task. A literature review revealed that practitioners of other helping professions have purported a need for social media policies (Bramstedt, Ierna, & Woodcroft-Brown, 2014; Cadell, 2013; Crtalic, Gibbs, Sprong, & Dell, 2015; Duncan-Daston, Hunter-Sloan & Fullmer, 2013; "Keys for developing", 2013; Lehavot et al., 2010, Ness, 2013; Pomerantz & Sugimoto, 2015; Sage & Sage, 2016). Walton, White, and Ross (2015) examined the potential implications of social media use on the professional image of physicians and medical students and acknowledged the complexity of defining online professionalism. They reported:

The rise of social media has led to growing concerns about the potential implications of 'unprofessional' postings by physicians and medical students on individuals, institutions, and the medical profession. Relevant and effective guidelines have been difficult to develop and enforce, and there is a need for students and physicians to consider how their online activities may be perceived in the context of their professional roles (Walton et al., 2015).

Professionals have begun to recognize the ethical implications of social media use among students and practitioners. However, these issues have gone largely unaddressed by scholarly

counseling literature. An American Counseling Association (ACA) professional magazine, *Counseling Today*, published an article that reviewed common ethical violations including those that involve technology use (Natwick, 2017). Natwick's piece urged counseling practitioners to consider the implementation of a social media policy before using social media in their practice. However, there is limited literature on the ethics of social media use and counselor preparation.

The goal defined here is to teach students ethical practices while in a counseling program, and to transfer those practices into their ongoing professional development and their future clinical work. This article addresses one model that may assist counselor educators to provide guidance in social media practices to counseling students. Issues relevant to counselors-in-training may also be applicable to practitioners.

This article reviews the social media policy and training procedures of a Clinical Mental Health Counseling program. The policy is discussed, and the training process is outlined and described. Finally, the article demonstrates how the policy is applied, using case illustrations that involve student advising and/or remediation examples.

Impetus for a Policy

The faculty decided that the creation of a social media policy was advisable due to student conduct that conflicted with ethical standards. This matter came to the attention of the faculty, through an alum of the program. The concern was that a student had posted comments on social media that identified the site supervisor and were derogatory toward their clinical site.

The student's negative remarks not only demonstrated poor professional judgment, but also jeopardized the program's relationship with the clinical site. The faculty considered the broad reach of the program's social network and the value to the program of its social capital.

Here, social capital refers to the trust and cooperation earned through collaborative affiliations between the program, its alumni and its clinical site partners.

The faculty also began to consider their responsibility to educate students regarding potential ethical concerns related to students' social media behavior. Faculty concluded that it would be advisable for students to self-monitor and assist each other in maintaining ethical electronic behavior. The program created its social media policy and planned implementation for the next academic year.

Policy Creation

The social media policy reviewed here was developed by the faculty of a CACREP-accredited Clinical Mental Health Counseling program at a private, Catholic university in the mid-Atlantic region. The program's University community standards policy was directly applied to behavior conducted online. These standards were based on values, such as inclusiveness and social responsibility, set forth in the university mission statement (Gannon University Office of Graduate Admissions, 2012-13, p. 1). The university graduate student catalogue contained a policy on professional integrity which stated that "students have an obligation to maintain ethical behavior in relationship to their profession" (Gannon University Office of Graduate Admissions, 2012-13, p. 8). In addition, the catalogue described professional behavior as that behavior "reflecting the status, character, and standards of [one's] given profession" (Gannon University Office of Graduate Admissions, 2012-13, p. 8). These university policy statements were considered to be consistent and applicable to a mental health counseling program. The counseling faculty determined that specific standards applicable to the counseling profession were necessary and indicated.

A search for professional counseling literature that addressed the creation of social media policies yielded no citations. The program faculty reviewed several organizational and agency policies. Several community mental health agencies, which serve as program clinical sites and that hire program alumni, had social media policies. Faculty also learned that agency staff had been fired as a result of social media policy violations. Consequently, program faculty created a policy relevant to counselor education. The implementation of the policy occurred in 2012, prior to the publication of the 2014 ACA Code of Ethics. Communication and interaction with counselor educators revealed that there were few other program policies in existence (Coppock & Willow, 2013).

The 2014 Code addressed technology and social media more specifically and substantially than previous versions of the Code. Addition of the technology section (H) of the code elevated the profile of digital ethics and accentuated its significance. Further, the Code situated digital ethics within the larger context of professional expectations.

The decision to craft a social media policy in 2012, although not prescient, was forward-looking and its relevance was confirmed by the publication of the 2014 Code that highlighted digital ethics. The determination to create a policy was made based on four factors: (a) the occurrence of student incidents, which involved Facebook postings that were considered inappropriate and unprofessional; (b) the awareness of program faculty that the absence of a written policy would limit their range of options in addressing any student social media concerns; (c) the desire to prepare students for the work environment and digital ethics expectations of clinical site placements; (d) faculty understanding that explicitly addressing policies for digital ethics is critical to students' professional image and on-going professional development.

Social Media Policy

The Clinical Mental Health Counseling program students are explicitly expected to abide by the ACA Code of Ethics. They are also bound to adhere to all policies in the program's student handbook including the program's social media policy. Practicum and internship students are also expected to acknowledge and follow social media policies at their clinical sites where those policies exist. If there are any differences between policies, the site's policy would supersede the program's policy while the student is engaged at that site.

Policy and Guidelines for Social Networking/Electronic Devices was first published in 2012 in the Clinical Mental Health program handbook, catalog, and web-page. The policy (Appendix A) was initially presented to program students at the Fall 2012 new student orientation. These publications and notices were consistent with the CACREP standards for program administration. The policy was included in the 2018 versions of the Clinical Mental Health program handbook, catalog, and web-page, and is housed within the broader context of program statements regarding ethical responsibility and professional standards.

The *Social Networking/Electronic Devices* policy addressed the broader issues of confidentiality, classroom etiquette, appropriate/inappropriate content, legal considerations, professional image and professional boundaries. Expectations were established for the types of electronic communication that would be inappropriate in terms of content (disrespectful images or content, slander, threats, and so forth) and occasions when personal electronic messaging would be inappropriate (class, clinical site). Potential compromises to confidentiality are listed, as well as the importance of refraining from references to clients, staff, or others whose personal information may be exposed. The policy did not necessarily present any information that would be considered innovative for most students. However, it did prompt students to consider their

own social media and electronic communication practices within the context of their new role as counseling students in a professional training program. Students were asked to reflect on the role of social media in their lives and how the content of their posted interactions may require adaptation in order to align with ethical standards.

Student Led Training

The social media policy was written with student input and feedback. The student members of the Chi Sigma Iota Gamma Upsilon chapter, affiliated with the program, were asked to design a training presentation and to present the social media policy to the new students. It was our casual observation that the chapter leaders readily embraced this role. This training has become an annual task of the student leadership. The rationale for the student leadership was that students, rather than faculty, will consistently be more likely to remain most familiar with the current applications and trends in social media platforms. Moreover, students are more likely to be engaged with one another through shared posts and communications. They would be likely to observe problematic communications, and mutually monitor their shared postings. Students are advised of the expectation to self-regulate and are culpable for indiscretions that they perpetuate, even if the material they share was originated by others. While there is no requirement to report on problematic, electronic communications of other students, the student-led training may perpetuate the establishment of group norms on social media expectations.

Based on faculty casual observation and anecdotal reports, this type of peer interaction and modeling seemed to mitigate resistance to social media monitoring. It has been observed by the faculty that current students are likely to be users of the same types of social media as new students. Thus, most new students consider current students to be their peers, and therefore to have credibility and shared experiences that may be lacking in a faculty-led training. Current

students have been able to contribute specific examples, to illustrate ongoing media changes, and to identify application idiosyncrasies. They encourage and assist new students to identify situations where they need to make adaptations to their current practices. For example, privacy settings on applications may need to be revised or a more restrictive “friends” list may be advisable in order to create professional boundaries that limit one’s public exposure.

Case Illustrations

The following case illustrations are based on situations that have come to the attention of the program faculty. These scenarios may be used to illustrate how social media and online access to personal information can present ethical dilemmas for students and professional counselors. The scenarios may be used in multiple ways such as case studies in a course setting, illustrations in supervision, or in supervision training. The cases have been masked and de-identified to maintain anonymity of the students and faculty involved.

- An internship student receives a crisis call from a client over a holiday break asking the intern for support. The client claims to have located the intern’s phone number online.
- A student posts angry and negative comments towards another classmate on social media.
- A student posts messages that seem to condone domestic violence.
- A student posts hateful and prejudicial comments towards a specific gender, ethnicity, race, or religion on social media.
- At termination, a client requests to be “friends” with their counselor on social media.
- A student in practicum/internship texts their supervisor about a question related to their client and uses identifying information, and other confidential details.
- A student completing their practicum posts comments on Facebook that belittle and disparage their practicum experience. This is reported to faculty by other students.

- A student sends an email to faculty that conveys anger, sarcasm, and hostility regarding feedback on a course assignment.
- A student has several sexualized pictures posted on Facebook of themselves in bathing suits and several where alcohol and drug paraphernalia are visible.
- A client has shared with their counselor that they have been viewing their counselor's dating site and other personal information online.
- A counseling student enters their Master's program with 1300 Facebook "friends," one of whom becomes a client during the student's practicum.

The introduction to section H of the ACA code of ethics charged counselors to conduct their personal as well as their professional social media interactions in a manner that is congruent with their role as professional counselors. These scenarios may be examined through the lens of other ethical standards such as: a) Professional Boundaries in Distance Counseling (H.4.b); b) Avoiding harm (A.4.a); c) Non-discrimination (C.5); d) Confidentiality Maintained by the Counselor (H.2.b.); and e) Use of public social media (H.6.d). In addition, the cases relate to the general expectations and spirit of the ACA ethical standards which, above all, prioritize client welfare.

The scenarios illuminate the ethical issues raised by the professional literature. Counselor educators are tasked to assist students with their professional development, which includes attention to electronic activity. Examples of the types of dialogue that these scenarios may stimulate are: a) understanding the consequences of electronic activity; b) the transparency of one's online presence; c) the effect of online material on the counselor-client relationship; and, d) how professional image is shaped by one's online activity.

Faculty Interventions

There is a wide variety of interventions that may assist faculty in addressing student ethical policy violations or social media dilemmas. These may range between formal advising sessions to remediation or even disciplinary action. Faculty may select an intervention that is appropriate given the circumstances, the student characteristics and developmental level, and the “in process” consequences of the situation. For example, there may be on-going reaction to a social media post already in process that may warrant faculty attention. For minor policy violations, a simple documented advisory meeting and expression of concern may suffice as an intervention. More serious ethical or policy violations may warrant suspension or even dismissal from a program. As a matter of course, interventions are developed in keeping with the due process policies of the program and institution. Examples of interventions include:

- Require a review of Section H of the ACA Code of Ethics (2014) and submission of a written response
- Require a review of the program’s social media policy and submission of a written response
- Require a review of specific professional literature that is pertinent to the situation and submission of a written response
- Mandate for the student to take a personal leave for a semester to focus on tasks to increase professional and/or personal maturity
- Other elements that may be incorporated in advising or remediation include: role plays, training for other students, revising online presence, making amends to those harmed

Written work may include a focus on:

- How the circumstances of the event are addressed within the ethics code

- How the circumstances of the event are addressed within the program’s social media policy
- How the student may have affected others involved
- How the student may have handled the situation differently
- Self-reflection to address the nature of student social media presence and self-portrayal to future clients and employers
- Use of an ethical decision-making model
- A plan for abiding by the Code of Ethics and program policies in the future
- The integration of the personal and the professional in the lives of counselors

Violations of either the ACA Code of Ethics regarding social media/technology or program social media policies may be addressed by faculty in innumerable ways. This limited list may provide initial considerations for faculty who may intervene when concerns emerge.

Discussion

The *Policy and Guidelines for Social Networking/Electronic Devices* was created and implemented by a Clinical Mental Health Counseling program at a private, Catholic university in the mid-Atlantic region. Validation for creation of a program social media policy was provided through subsequent publication of literature on the advisability of designing such social media policy. Program faculty found related guidance in publications written for psychologists (Campbell et al., 2016; Kolmes, 2012). The program policy, therefore, provided some consistency of approach within the helping professions.

Campbell et al. (2016) emphasized the point that programs need an explicit social media policy in addition to the existing Code of Ethics. Campbell et al. (2016) voiced the belief that “the specialized nature of professional psychology training demands a more individualized

policy” (p. 205). Although similar language has not been used in counselor education literature, certainly counselor educators face parallel concerns. These parallel concerns may be shared by any helping professionals who engage in client relationships. These may include: privacy, confidentiality, unintended self-disclosure or transparency, inadvertent dual relationships, public access to personal material, decisions about if and who should monitor graduate students’ social media use, online consultation, and the definition of “appropriate” social media behavior (Campbell et al. 2016; Kolmes, 2012; Zur et al., 2009). This literature supports the rationale for counseling programs to consider social media and electronic communications as an ethical issue that warrants policy attention.

The formation of the *Policy and Guidelines for Social Networking/Electronic Devices* was a response by Clinical Mental Health program faculty to a perceived need to address student social media behavior. Although the response was initially related to a problematic incident, the faculty and students have emphasized proactive dialogue about electronic communications. Faculty have endorsed the social media policy as one among many tools promoted by program faculty to encourage the development of a professional image. Since the implementation of this policy (2012), it is noteworthy that no students in this program have been remediated due to violation of the social media policy. We cannot make the assumption that no student has acted in violation of the policy, merely, that no violation has been problematic enough to come to the attention of the faculty.

Program faculty choose not to actively monitor or scrutinize student social media. However, faculty are committed to student and program adherence to the policy and will address any overt or communicated discrepancies. Campbell et al. (2016) referred to this difference as “active versus passive” policy implementation (p. 205).

The decision to utilize student leaders to implement and discuss the social media policy has been deemed effective by faculty. This evaluation is anecdotal and based on informal faculty observation and student comments. The strategy to engage student peers in the policy implementation was subsequently affirmed through professional psychology literature. Others have reasoned that digital natives may be better equipped than digital immigrants to provide relevant mentorship regarding the nuances of electronic communication (Campbell, et al. 2016; Kolmes, 2012, p. 606).

Although it is beyond the scope of this article to provide formal program evaluation, second-year students in the program were informally polled for comments on how the program policy affected their social media decision-making. Responses included: a) changed their name on social media to increase anonymity; b) eliminated their Facebook account; c) made their accounts private and remain vigilant on privacy settings; d) consistently searched one's name on search engines; e) reduced their friends or followers; f) increased attention to posted content. Future research to investigate extensive and detailed program evaluation is recommended.

The limitations acknowledged here are that the presented social media policy has not been revised to include suggestions mentioned in subsequent related publications. Revisions are planned for the next publication of the program's student handbook. This includes the suggestion to clarify definitions of social media and appropriate online behavior, as well as more specificity with risks to privacy that electronic communication poses. Our evaluative statements regarding students' assessment of this social media model are based on casual observation. Future studies are recommended to directly evaluate the student experience.

Generally, scholarly literature is needed to explore digital ethics and social media training specifically for professional counselors. It is notable that learning ethical social media behavior

is not only an opportunity to develop one's professional image, but also supports ethical social media behavior with future clients. We recommend counseling programs to consider their training and policies that relate to social media use. Technology and social media innovations are continually emerging. This reality presents unique challenges to develop social media policies and to maintain their relevance. Counselor educators and students may benefit from scholarly literature that addresses these challenges.

Summary

Counselor education faculty are ethically obligated to provide guidance and training to counseling students regarding the use of social media and technology. There is an absence of professional counseling literature that addresses the specific implications of this obligation for counseling programs. This article provides an example of a policy created by faculty of a clinical mental health counseling program, a student-led training plan, case examples and intervention options. The main limitation of this article is that it is a living document designed for a specific program at a private institution. Generalization to Clinical Mental Health Counseling programs at other institutions may require further refinement. This article is designed to contribute to the professional discourse on how to address social media and technology in counselor preparation programs.

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Appendix

Policy and Guidelines for Social Networking/Electronic Devices

Policy:

The Clinical Mental Health Counseling Program expects adherence to the following guidelines and practices which are intended to protect the integrity of the students, faculty, clinical site supervisors, ABC University, and the public. This policy provides specific guidelines and protocols for Clinical Mental Health Counseling students and faculty in the use and application of electronic forms of communication not limited to: Face Book, Twitter, My Space, You Tube, Blogs, Live Journal, email, communication through ABC's learning management system (BLACKBOARD), text, and other future forms.

Clinical Mental Health Counseling students are expected to accept the responsibilities of social media participation and the use of electronic devices.

General Guidelines:

Current students must:

- Demonstrate respect for the ABC University Clinical Mental Health Counseling Program, faculty, staff, and students
- Refrain from electronic communication while in class or at clinical experience sites
- Demonstrate respect when references are made which reflect on ABC University Clinical Mental Health Counseling Program, faculty, staff, and students
- Be aware that actions posted in images or comments can reflect on your professional image and status as an emerging professional counselor

- Prevent and report cyber bullying, harassment, discrimination or illegal activity to the Program Director that involve ABC University Clinical Mental Health Counseling Program, faculty, staff, and students
- Prevent and report any circumstances of a threat or slander of another individual to the Program Director.

Additional Guidelines for Practicum and Internship:

Current practicum and internship students must:

- Not refer to clients, families, staff, colleagues, or their Clinical Experience sites in any way
- Demonstrate professional communications that acknowledge:
 - Understanding that email and text messages are not secure methods of communication and should not be used for transmission of confidential information either in the body of the email or as an attachment
 - Understanding that the use of disclaimers does not release the responsibility of the sender and/or receiver of the information from ethical/legal mandates provided by HIPAA, FERPA, and other regulations protecting privacy and confidentiality
 - Understanding that client contacts can become court records: emails, text messages, IM's, Twitter, etc.
 - Conformity to work schedules so as not to create the illusion of expanded availability for clients (Maintain appropriate time boundaries for email, text messages, Face Book, Twitter, and other electronic forms of communication)

Additional Guidelines for Face Book:

- Demonstrate professional communications that reflect:
 - Images congruent with ethical standards of a professional counselor-in-training such as counselor integrity, past and current client confidentiality, boundaries
 - Understanding that information can be viewed by clients, potential employers, peers, colleagues, faculty, and supervisors.
 - Understanding that information posted does not ever “go away”
 - Understanding that information can be copied, printed, and reposted to multiple sites, searched using search engines like Bing, Google, and Yahoo