

**A psychotherapist's experience of self-  
disclosure, when practising in the digital era:  
A heuristic self-study**

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## **Abstract**

Self-disclosure has been a topic of interest since the conception of psychoanalytic practice. Once considered a hindrance to practice, self-disclosure has developed into a tool within the therapist's toolbox. With the rise of the Internet, resulting in more information readily available and accessible online than ever before, the notion of self-disclosure is changing. This study intends to heuristically explore the phenomenon and experiences of self-disclosure within psychotherapy, in the digital era. Specifically, the therapist's experience of self-disclosure, alongside how having a digital footprint has influenced and altered self-disclosures within therapeutic relationships, is examined. The intention of this study is to begin to address a gap in a new and emerging field, whilst drawing upon personal experiences and existing research. A heuristic self-study is used to investigate the phenomenon, considering self-inquiry and direct experiences within a larger, societal context, allowing the phases and processes of heuristic inquiry to guide the research. The study intends to provide deeper insight into the lived experiences of the psychotherapist, specifically one whom has a large, revealing online presence; and thus provide a new understanding of how practising in the digital era may impact therapeutic and interpersonal relationships.

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## **Attestation of Authorship**

I hereby declare that this submission is my own work and that, to the best of my knowledge and belief, it contains no material previously published or written by another person (except where explicitly defined), nor material which to a substantial extent has been submitted for the award of any other degree or diploma of a university or other institution of higher learning.

Hannah Longley

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This piece of work is dedicated to my sister. May your spirit continue to shine through all that I do. May the world do all they do with kindness.

*We all cling to life and its uncertainties. It's not easy in these cynical times to cast off the hardness and edge that gets us through our days. But try just a little. Open your eyes, and you will see what I can see. And if you've ever wondered what happens what a person close to you is taken too soon – and its always too soon – you may find other truths here, truths that may break the grip of sadness in your life, that may set you free from guilt, that may even bring you back to this world from wherever you were hiding. And then you will never feel alone. (Sherwood, 2004, pp. 3-4).*

# Chapter I: Introduction

## Introduction

This chapter will cover how my research topic initially came to be evoked in me, how I came to my question, and my interest in this topic. Context, aim, scope, key areas of concern, and the significance of the research will also be discussed. While personal consideration of the topic is explored, the broader relevance and implications are also considered, including how the research fits into the field of psychotherapy.

## Context

I came to this topic after a great deal of wondering. I had many other ideas in mind; some perhaps too substantial for a dissertation, some of personal interest to me but perhaps just too far removed from psychotherapy to pursue. After some personal reflecting, I asked myself: what is important to me within my practice? What is something I struggle with, and hope to learn more about? From there, I began to wonder about self-disclosure and how understandings of self-disclosure are changing due to the Internet, alongside my own interpretations of self-disclosure within my practice. This topic felt relevant on an interpersonal and generalisable scale, and specific implications within psychotherapy were recognised.

From the beginning, this topic embodied characteristics of heuristic research. This phenomenon involves a great deal of tacit knowing; we know the Internet has an impact on the personal and professional life of the therapist, without specifically knowing what, why, or how. Our knowing is partly based on past experiences, such as how the Internet has significantly changed our lives in short periods of time, meaning it will continue to have a similar impact; however, we will not know this impact until it is upon us. Similarly, upon beginning this research, I had a tacit awareness of my own anxiety in practice, specifically in regards to self-disclosure. However, this anxiety felt murky, seeming always just out of reach from my conscious knowing, yet implicitly present. This is reflective of the interpersonal level in which this study has relevance: it is an attempt for me to better understand my own meaning and experiences, looking deeper into how such meanings and understandings impact my practice as an aspiring psychotherapist.



I am seeking to heuristically explore how having an online presence impacts the psychotherapist, specifically in regards to self-disclosure, and how one's online presence may lead towards self-disclosures within therapeutic relationships. The heuristic process involves being intimately connected to your experiences (Moustakas, 1990)—meaning a heuristic researcher's self-disclosure within their research is seemingly inevitable. I am aware this dissertation is considered a 'self-disclosure' that, one day, may well end up online for anyone to read. Thus, that is the phenomenon in its entirety. We seem to live in a world where striving for total anonymity is perhaps no longer a realistic or attainable option, whereby the line between online and reality has become so blurred, it is difficult to distinguish between the two. This blurring has become even more apparent throughout the COVID-19 epidemic; we have been encouraged as students, as training psychotherapists, to practice online. With the change in practice came additional caution towards my own online presence. I was suddenly concerned with things with which I had previously not given a second thought. What photo should I attach to my email account, if any? What is the risk of clients and families having my personal phone number or email? Can it be avoided, when we are now only able to communicate in this electronic way? Whilst I will never understand the Internet's algorithms, one very real 21<sup>st</sup> century problem is the way in which multiple different media channels are intertwined. Through having another's phone number, anyone you have ever called or texted begin to appear on your social media channels; a notion with rather unsettling implications, leading to a variety of anxious wonderings and phantasies. Yet, we have reached a point in time where being online is the norm; specifically, offering online therapy amongst the ongoing crisis of COVID-19. Therefore, one may propose those who do not have an online presence now become the outlier—a very different statistic, say, to a decade ago.

Thus, I must highlight the generational lens in which I view the world. Being born in the 1990s, I did not exist in a time without a computer in the home. My whole life I have known, been exposed to, influenced by, and grown up with technology. In the short space of my lifespan, technology has changed dramatically, and continues to do so—from my upbringing, where we had a home phone and a dial up computer, to current society, where it is common for children to have the latest technology, and where 'BYOD' (bring your own device) is a requirement of education. For the generation I grew up in, not having an online presence simply

seems unattainable and unrealistic. Social media and online activity are the way of the world, made increasingly apparent by COVID-19. The argument I hear time and again is to simply delete social media accounts; or, if I choose to have one, to make it private. Also, avoid using personal phone or email. Also, remove any existing online footprint. It seems as though there is no end to the 'also'; each also proposes another, and they seem to multiply at an impossible rate. There comes a point where we have to consider why we are putting in place all these boundaries? Who do they serve? Is it actually possible, or sustainable, in ever-progressing societies? As an aspiring psychotherapist, my beliefs note we need to adjust our practice as the world changes as to not be left behind, rather than expecting our practice to remain ridged in a changing world.

I recognise my bias, as is the essence of heuristic studies. As this is a self-study, my own experience is my bias. However, I am attempting to bring my experience with me on this journey, acknowledging and incorporating its existence and meaning, whilst also going beyond it. Being open to the experience of others, alongside my own, highlights the essence of psychotherapeutic practice. Thus, it feels appropriate to emphasise why my digital footprint is so significant, other than due to the fact I am part of the digital generation. When my sister passed away in 2011, her death was worldwide, front-page news. It was covered in a range of ways, by various media outlets and continued for a significant length of time. Her story is recognised by many. Even now, when reading stories similar to hers, it is not uncommon to come across her name and photo, my parents' names, or even my own. This experience is a core part of my being, but is not something I see as appropriate to disclose to clients. Yet, with a simple search, it is easily accessible information about a very personal trauma I experienced. These ideas are discussed in depth in the findings chapter.

### **Aim and Scope**

This dissertation is a heuristic self-study into my own experience of having a profound digital footprint, whereby my large online presence feels overwhelming and out of my scope of control, and how it impacts my work as a psychotherapist. The ways in which the processes and phases of heuristic inquiry are incorporated into this study are highlighted in chapter two. Primarily, the aim of this study, on a

general level, is the exploration of how having an online presence impacts self-disclosure and the therapists. At the core of the inquiry is self-exploration and self-knowledge, similar perhaps to what a client seeks upon entering psychotherapeutic interventions. Thus, I am hoping my effort to better understand my own experiences and myself is transferable to enhancing my practice as a psychotherapist. Given the limitations of this study, how the Internet impacts being a client in the 21<sup>st</sup> century has limited consideration. Based on existing literature, a number of researchers (Audet & Everall, 2010; Dixon & Psychopathology Committee of the Group for the Advancement of Psychiatry, 2001; Taylor et al. 2010; Ziv-Beiman et al. 2017) have highlighted that due to the vastly changing times, it is critical to consider how the current society impacts practice. This open examination of my own experience may lead to unique insights and perhaps enhance my ability to provide more effective intervention; whilst complimenting, critiquing, and adding to existing literature, specifically in regards to research surrounding self-disclosure and practicing as a psychotherapist in the digital era.

### **Key Point of Concern**

Further elaborated on in chapter three, existing literature highlights how self-disclosure impacts the therapeutic relationships. However, consideration for having an online presence, disclosures that come about without the therapist's knowing or consent, and how this impacts the therapist appear limited within current literature; not enough recognition is being given to how technology impacts interpersonal relationships, including a therapist's relationship to their clients. Taylor et al. (2010) and Lehavot (2009) elaborated, claiming the Internet has become an indispensable tool within our current society, whereby its usage is only expected to grow. Yet, limited consideration has been given in regards to the new generation of therapists, whereby having an open and engaging online presence is becoming a generational norm. One may also question how we intend to address such a phenomenon, when the phenomenon itself is rapidly changing.

I intend to explore my own experiences, specifically in relation to how my experiences impact my practice as a psychotherapist. Further, the examination lies at the heart of this heuristic study, whereby the research seeks to discover how having an online presence impacts self-disclosures in psychotherapy practice. I believe a heuristic inquiry from the perspective of a budding psychotherapist, who has a

significant digital footprint, will highlight both the struggles and the benefits of having such a widespread digital footprint, perhaps provoking future ideas for ways of working in the digital era. Through researching the phenomenon from a personal experience, I aspire to build upon existing literature and ideas in a unique way.

### **Significance**

Through informal conversation, it appears that having an online presence is a concern for psychotherapy students, and others, due to the risk of disrupting their anonymity, impacting their work with clients. This concern was highlighted when a peer told me she considered becoming a therapist to help others who had been through situations similar to her own but recognised she would likely have to give up her online advocacy voice—a sacrifice she was not willing to make. I wonder how many psychotherapists, or other health practitioners, the world is missing, simply because some believe they would have to sacrifice their online presence in an effort for therapeutic anonymity.

What became apparent as I wrote is my struggle in being able to adequately describe and explain the different components and relevance of this research. Stern (1985) claimed that language can significantly enhance interpersonal awareness, as verbal experiences are what appear to be mostly accepted into awareness. However, language also holds the potential to drive a wedge between what is verbalised and what is known; what is inter-subjectively experienced cannot always be adequately verbalised, meaning there is the potential to become estranged from one's own experiences. Ultimately, putting subjective experiences into language is challenging, and one's attempt to verbalise their experiences can result in failure to accurately convey one's unique personal subjectivity, leading towards inaccurate information, misrepresented experiences, or false-truths (Stern, 1985). Thus, an endeavour and a struggle of this research was putting language to an experience that, up until this point, remained mostly unspoken.

This split between tacit knowing and verbal retelling sits true to my experience and is something I perhaps had not considered prior to conducting this research. I am gradually finding acceptance in the fact that whilst the experience underlying the research phenomenon exists in my consciousness, there are components to it that remain unconscious. Thus, as I am yet to completely

consciously comprehend my experience, how can I completely verbalise it? There will perhaps be parts of my experience that will never make sense, remaining unconscious. However, part of this process is accepting, whilst also challenging, what is tacit and unknown. This struggle is elaborated on in the findings chapter.

Ultimately, I hope this research speaks the words and finds new understandings that, up until this point, I have struggled to find. Stern (1985) claimed that once access to our experiences is made, we are able to construct a new narrative that may transform our lives. This is what I hope to achieve throughout this study. On a personal level, I strive to understand my experiences in a new way, heuristically exploring my own my experience as someone who has gone through a public trauma, and my experience as a psychotherapist. Further, on a generalisable level, this study is significant in considering how, as psychotherapists and as individuals, we consider the help and harm of online presences, and how the Internet is changing the way we perceive and engage with self-disclosures, all within a rapidly ever-changing world.

## **Summary**

This study intends to explore the relationship between self-disclosure and the digital era. A heuristic study will ensure my own meaning and experiences remain at the centre of the research, whilst also considering the implications at a societal level.

## **Chapter II: Method and Methodology**

### **Introduction**

In this chapter I discuss the methodology chosen for the research, outline the philosophical and theoretical underpinnings of heuristic research, and analyse the phases and processes of heuristic inquiry. I also explore my experience of engaging with heuristic research.

### **Philosophical Underpinnings**

Ontology refers to the nature of reality, our most basic beliefs about human beings and human nature, and how our own beliefs intertwine with the nature of how we see reality. As reality is seen through multiple views, heuristic research focuses on the experiences and reality of the researcher (Moustakas, 1990). Epistemology refers to truth and knowledge. Knowledge and truths of any form are constrained by the points of view of the knower; meaning, knowledge and truths are always contextual and perspectival. While we have the ability to know, we also have the capacity to learn. We are continuously learning from others and enhancing potentials, and through expanding our knowledge and perspective, we also expand our capacity to see truths through others' perspectives, perhaps similar or different to our own. A fusion of knowing enables researchers to bring together thoughts and feelings, allowing us to expand upon pre-existing truths, or perhaps bringing awareness to new truths.

Axiology refers to the study of values. As humans, we are naturally relational and desire connection. Our personal values and how they align with other people's values impact our way of being in the world, meaning it is important to align ourselves with people who embody the same truths and values we do. However, one must also acknowledge biases that impact our own narrative, understandings, and interpretations. Research paradigms are based on ontological and epistemological assumptions and act as an overarching perspective that determines research practice. Grant and Giddings (2002) highlighted four research paradigms, all with unique philosophical underpinnings. The interpretive paradigm seeks to get back to the things themselves, in an attempt to understand what it is to be human, and what meanings people ascribe to the events of their lives. Methodology refers to the

process and the language of the research, influenced by one's ontology and epistemology (Grant & Giddings, 2002).

The methodology undertaken in this research, guiding the research design and methods, is a heuristic self-study. This research also sits within the interpretive, phenomenological paradigm. The research intends to use human experience in order to describe the essence of the phenomena, focusing on discovery through self-understandings brought about by interpreting thought. Interpretive research can be seen as taking a step away from theory, focusing instead on discovering and understanding self-experience. Interpretive researchers attempt to understand self-experiences and self-understandings in an effort to understand the meanings ascribed to experiences and thus deepen understandings of significance (Grant & Giddings, 2002).

### **Heuristic Self-Study**

Heuristic inquiry is an investigation into human experiences. Attention turns inward, inviting the self-as-researcher to surrender to the feelings within an experience, carrying the researcher towards new awareness' of the self. The goal of heuristic inquiry is to come to a deeper understanding of the phenomenon that is calling out from inside the self to be understood; achieved through having and maintaining a steady internal gaze. The journey of heuristic inquiry allows the researcher to shift unconscious ideas into conscious awareness, awakening a greater self-understanding with transpersonal and societal implications (Moustakas, 1990; Sela-Smith, 2002).

Sela-Smith (2002) described the heuristic self-study as the internal subjective experience of the I-who-feels; a self-search in which the researcher discovers the nature and meaning of the research phenomenon, leading towards growth in regards to self-awareness and self-knowledge. Through researching the I-who-feels, the researcher becomes able to access knowledge meshed within unconscious feelings. It is described as a process, whereby the researcher surrenders to the feeling within the experience and does not know what will be learnt when the research commences. There is no hypothesis or expectations for the outcome; instead, the aim is to establish new connections and meanings, coming to a new awareness of significance. Similarly, Stevens (2018) recognised this challenge of psychotherapy research, which does not follow the same assumption of other, more linear and logical areas of

research. Instead, psychotherapeutic interactions are responsive to a particular moment, influenced by a certain perspective or interaction, measuring what research outcomes happen to measure. A key critique of heuristic inquiry is the notion that this type of research should not be limited by the constraints of time. Sela-Smith (2002) argued the phases lose authenticity when determined by time. This critique is held in mind throughout, as this research had a significant and unavoidable time restraint that had both positive and negative implications for the findings and discussions.

As an aspiring psychotherapist, it was important the research aligned with the values and experience of being a psychotherapist. The chosen phenomenological philosophy is concerned with self-experiences, wherein it is believed that hearing or observing a first-hand description of the experience is as close as one can get to the experience itself (Grant & Giddings, 2002). As heuristic inquiry is similarly concerned with investigating and discovering human experiences that are relevant to the researcher on a personal and societal level (Moustakas, 1990), and as subjective experiences are the heart of psychotherapy, a qualitative, phenomenological approach felt appropriate for this research. Further, through the research, I aspired to gain a deeper understanding of my own experiences on a journey towards a newfound self-awareness and self-knowledge, which I believed would have implications on a generalisable and interpersonal level.

### **Phases and Processes of Heuristic Inquiry**

Moustakas (1990) outlined seven processes involved in the researcher's journey of arriving at a deeper understanding of the research phenomenon through heuristic inquiry: identifying with the focus of inquiry, self-dialogue, tacit knowing, intuition, indwelling, focusing, and establishing an internal frame of reference. Whilst there is cross-over between these processes and the phases of heuristic inquiry, these seven concepts are valuable within their own right. The processes serve as a channel for the phases in the sense that each of the phases is implemented during at least one of the processes. The processes and phases work in collaboration to support the exploratory, introspective, creative, experiential, and relational facets of heuristic research. Further, the terminology may indicate the processes and phases occur in a set order or timeframe. However, neither the processes or phases unfold in a



chronological or set fashion; rather, they follow a general flow that can be revisited for varying lengths of time, at different degrees of intensity, depending on the research needs (Sultan, 2018). Surrendering to heuristic inquiry involves being fluid, shifting from one phase and process to another, visiting and revisiting each phase and process for different amounts of time, depending on where the research course is headed, highlighting the uniqueness of heuristic inquiry.

### ***Identifying with the Focus of Inquiry***

Heuristically identifying with the focus of inquiry involves establishing the research topic and question, whilst the researcher allows the study to speak to their own experience, exploring what makes up an experience through self-discovery, awareness, and understanding (Moustakas, 1990). The researcher immerses themselves within the research phenomenon, beginning to explore, interact with, and establish understandings of the phenomenon (Sultan, 2018). The focus of inquiry is open ended and self-directed. The direction of inquiry comes from the researcher's interests, pre-established truths, and tacit knowing; the researcher seeks to understand, rather than answer, the research question (Moustakas, 1990).

### ***Self-Dialogue***

Self-dialogue is the process of communicating with oneself about the research phenomenon, constantly shifting from concept to experience, back to concept; from whole to part; from individual to general (Sultan, 2018). Self-dialogue is a highly reflective, on-going process, involving the researcher engaging, leaving, and re-engaging with the research. A core process of self-dialogue is to attain and enter into a holistic understanding of the research phenomenon through one's own self-exploration, while keeping an attitude of wonder, awareness, curiosity, trust, and receptiveness to anything that may emerge (Moustakas, 1990; Sultan, 2018). For self-dialogue to occur, the researcher remains open to, and trusts in, their own experiences, self-awareness, understandings, and knowledge (Moustakas, 1990).

I began to consider my topic throughout 2019. I brainstormed ideas, eventually landing on the topic of self-disclosure in the digital era. Identifying with the focus of inquiry involved engaging in self-dialogue, asking myself what I already thought I knew about self-disclosure, the impact it had on therapeutic relationships,

how my personal experience related to this topic, and wondering what others thought about the topic. I also began to explore how I could acquire additional information. Self-dialogue included having internal and external dialogues in the form of writing responses, ideas and reflections, anytime they came about, that perhaps clearly or unclear linked to the research phenomenon.

### ***Tacit Knowing***

Tacit knowing is considered by Sela-Smith (2002) as the data within. Felt within the researcher, it is often the prompting factor behind the research phenomenon, as the researcher hopes to lift this data into conscious awareness. Tacit knowing is knowledge that we cannot verbalise—we just know. It is what Bollas (1987, 1995) referred to as the ‘unthought known’. Influenced by Freud’s notion that we may sometimes know things without ever consciously thinking about them, Bollas (1987) defined the unthought known as experiences and representations that are in some way known to a person, yet the person is unable to consciously think about them. Unthought knowns often represent early schema for representing the preconscious object world and preverbal early activity, which lays the foundation for development and expectations, influencing behaviours and thoughts (Bollas, 1987). An unthought known remains unthought until one is able to process it, bringing it into conscious awareness. Sela-Smith (2002) explained it is only when an internal focus is maintained, whereby the researcher focuses on their own experiences rather than the experiences of others, that tacit knowledge can be shifted into conscious awareness.

Tacit knowledge is implicit knowledge. Whilst explicit knowledge is observable and describable, implicit, tacit knowledge is a dynamic understanding of a phenomenon, informed by past and present experiences of that same, or similar, phenomenon (Moustakas, 1990). Tacit knowledge is the foundation of heuristic discovery. It involves working with personal knowledge of a topic that we understand deeply, without necessarily being aware that we in fact do understand the topic in such a complex way. Tacit knowing allows the researcher to begin investigating ideas, hunches and formless insights, feelings and intuitions, leading to an evaluation of old and new experiences (Moustakas, 1990; Sultan, 2018). Only when the researcher surrenders to feeling the feeling, experiencing the experience, may long hidden tacit knowing emerge. Once conscious, this knowledge has the

ability to transform self-knowing, guiding new understanding and awareness of experiences (Sela-Smith, 2002).

Tacit knowledge becomes apparent when I reflect on my passion to deeply explore my research phenomenon. Tacit knowledge also guides us through the unknowns that are an inevitable aspect of psychotherapeutic work, whereby a significant aspect is following and trusting instincts. While I can recognise some of my own anxieties within therapeutic relationships, the underlying complexities appear less clear. My anxiety appears to be an unthought known, existing more so in unconscious, rather than conscious, awareness. This research process has enabled me to begin to bring some tacit knowing into consciousness, to be thought about and discussed, formulating new wholes and understandings.

### ***Intuition***

Moustakas (1990) described intuition as the bridge between tacit (implicit) and explicit (describable and observable) knowledge. As the researcher begins to integrate experiences and tacit knowledge with explicit knowledge, intuition connects internal and external experience with the here-and-now, allowing the researcher to notice and engage with recurring themes and patterns within the data. Additionally, intuition assists the researcher in decision-making that eventually leads to the creation of new knowledge and meaning (Sultan, 2018). Intuition facilitated my ability to begin integrating my own tacit knowledge with explicit knowledge, out of which new ideas and themes started to become apparent. Further, through intuition, themes and ideas that were known, but unclear, began to emerge and be recognised with newfound depth and clarity.

### ***Indwelling***

Indwelling involves the researcher turning inward to seek deeper comprehensions and meaning of the nature of human experience, in relation to their research (Moustakas, 1990). Indwelling is a highly reflective process that requires patience as the researcher repeatedly returns to the phenomenon in order to unravel its essential qualities, feeling and experiencing the phenomenon in new ways. Repeatedly and tenaciously going through the process is critical, as it eventually leads to a place of newfound knowledge, adding to what we already know and understand, facilitating

the process of growth and transformation. Through the process of indwelling, the researcher is again shifting between internal and external, subjective and objective, tacit and explicit, as they connect to both the individual and the societal experience of their phenomenon (Moustakas, 1990; Sultan, 2018). Indwelling, for me, seemed like a more spontaneous process. There were times where I was reading or writing, or doing something else entirely, and moments of intense reflection and deep thought would come about. Through following these reflections and wonderings, I found myself linking my own and general experiences, deepening my understanding of the research, taking thoughts and ideas to new places, seeing things I had seen before in a new way, or making and discovering new connections.

### ***Focusing***

Within heuristic research, focusing involves pausing in order to mentally and emotionally clear the mind and body. Through focusing, the researcher has space and time to eliminate what Sultan (2018) referred to as clutter that may be blocking our view. Such clutter may be making the researcher unable to see core themes or understandings. Through focusing, the researcher is able to de-clutter their inner world, making space for more mental and emotional clarity, allowing hidden components of an experience to arise, whereby multiple meanings and core themes can emerge. Focusing is an open-ended process that requires patience and perseverance as the researcher engages with various unknowns. Focusing allows researchers to create and maintain openness and acceptance within the research process, meaning any developments are recognised as potentials for transformation, facilitating movement through the research process (Sultan, 2018). I noticed focusing often coincided with incubation, as taking a break from my research allowed me to eliminate mental and emotional clutter, allowing for greater clarity upon re-engaging.

### ***Internal Frame of Reference***

None of the previously mentioned processes can successfully occur without researchers deeply comprehending their experiences (Moustakas, 1990). Through having an internal frame of reference, the researcher is able to maintain a mental and emotional container, as they repeatedly return to seek within themselves a deeper understanding of their own perceptions and awareness (Sultan, 2018). My internal

frame of reference allowed me to continuously come back to my question, my experience, and the methodology, enabling the research to stay on track. Having the frame and continuous reminder of my passion for the research ensured I could remain focused, following thoughts and ideas as they presented themselves, while not drifting too far from the proposal. Such containment facilitated my ability to go deeper within my experience and myself.

Alongside the seven processes, Moustakas (1990) also outlined six phases of heuristic inquiry: initial engagement, immersion, incubation, illumination, explication, and creative synthesis, summarised in table one.

**Table 1.** The Six Phases of Heuristic Inquiry

Initial engagement	Researcher's first contact with a topic of intense interest or a research question and/or with various other phases of the study
Immersion	Researcher's full commitment to living the question or topic, in all dimensions of life, as the question becomes the primary focus of the researcher's attention
Incubation	Researcher's temporary and deliberate withdrawal from the research question or topic to allow seeds of new knowledge to sprout
Illumination	Researcher's awareness (usually intuitive) of previously undisclosed information related to the research question, often coupled with altered perception of the topic
Explication	Researcher's exploration of emergent themes and fine-tuning of those themes in preparation for the creative synthesis
Creative synthesis	Researcher's integration of the multiple themes of the topic into a cohesive whole, usually using some form of creative interpretation

Adapted from Heuristic inquiry: Researching human experience holistically (Sultan, 2018).

### ***Initial Engagement***

Throughout the initial engagement, the researcher begins to consider their internal knowledge and tacit awareness of the research topic. Movement is stimulated as the researcher seeks more information from a range of sources, while becoming involved and engaged with the topic, stimulating a desire for deeper exploration (Moustakas, 1990). Sultan (2018) added initial engagement often occurs alongside identifying with the focus of inquiry and intends to inspire a process of self-dialogue, tacit knowledge, and intuition supporting the formation of the research question. The researcher embarks on an internal search that involves connecting to the research topic with a compelling, intense interest of personal and generalisable significance.

Similar to identifying with the focus of inquiry, initial engagement was a process that took place over a few months, beginning in late 2019. I began to brainstorm ideas for my research, before narrowing in on a clear, succinct phenomenon. Once the idea was clear, I began to engage with my own experiences, whereby it became apparent the research falls in line with heuristic methodology. I noticed I was interested in doing a self-study, exploring my experiences and how they aligned with reality, connecting to some tacit knowledge. Additionally, initial engagement involved familiarising myself with pre-existing research, ensuring that my research topic was relevant to the field of psychotherapy. Once the initial engagement commenced, more research and questions inevitably followed.

### ***Immersion***

Immersion involves the researcher becoming intensely involved with their research question, where knowledge and understandings live and grow while the researcher remains alert and receptive to possibilities of knowledge and integration (Moustakas, 1990). The intensity of immersion will vary depending on where the researcher is with their inquiry and what they seek to explore, incorporating self-dialogue, intuition and indwelling into the intimate process (Moustakas, 1990; Sultan, 2018).

### ***Incubation***

Incubation allows the researcher to retreat from intense, attentive research, giving space and time to engage in activities unrelated to the research which allows for mental space and focusing, leading towards clarity and the emergence of new

knowledge and ways of being (Moustakas, 1990; Sultan, 2018). During incubation, the researcher consciously disengages from the research, although complete disengagement does not occur. Instead, incubation allows understandings and growth to occur beneath conscious awareness. Similar to focusing, through diverting attention elsewhere, things that once seemed outside of our stream of consciousness become clearer on a conscious level (Moustakas, 1990; Sultan, 2018). Researchers do well to notice when incubation is of the essence, such as when they begin to feel a state of anguish towards their research, or when ideas continuously seem just out of reach. Without incubation, the researcher risks going through extreme mental and emotional strain, creating tension, detrimental to research (Sultan, 2018).

### ***Illumination***

During incubation, knowledge is being generated on a more unconscious level. Illumination pulls this knowledge into conscious awareness (Sultan, 2018). When researchers remain open and receptive to newfound knowledge, illumination allows for discoveries that were previously beyond awareness to become clear, as the researcher becomes aware of new, previously inaccessible understandings of experience. Illumination allows the researcher to consider old knowledge in new, insightful ways, adding to the discovery process, paving the way towards new awareness. In seeking to understand, the researcher modifies old understandings, brings together fragmented knowledge, or comes to a new discovery altogether (Moustakas, 1990; Sultan, 2018). Illumination occurs multiple times throughout the research process as new and different thoughts breakthrough, leading to more knowledge breakthroughs, which may feel confusing as each breakthrough and piece of new knowledge could lead to more uncertainty (Moustakas, 1990).

Upon beginning this research, I understood the phases to be chronological, time limited tasks. As research progressed, I realised that is not the case and found myself predominantly floating between immersion, incubation, and illumination. Initially I envisioned I would stay in a place of immersion until research was near completion. However, I quickly learnt engaging in immersion for long periods of time was unsustainable, as immersion involves periods of intense and dedicated research, with great deals of reading, writing, and reflecting; utilising indwelling, tacit knowledge and intuition. When I noticed ideas becoming foggy or out of reach,

I allowed myself time for incubation and focusing. I similarly thought incubation would be a profound, significant break from my research. I phantasised it like going away to a resort, free of computers or academic books, isolated from the outside world. I now realise incubation can simply be a few hours, a day, or a few days, where I put my computer away, take space, and return when I am ready. During this time, I mentally removed myself from my research, and engaged in leisure activities such as exercising, socialising, or reading non-academic books.

Incubation was absolutely necessary, specifically when I noticed my thoughts, reading, and writing were no longer making sense, or when I was starting to dread the research. Further, times of incubation allowed me to maintain a deep passion for the research, as it did not feel forced. By recognising when incubation and focusing was required and taking an active, restful break, the times when I was in immersion felt more genuine, fulfilling, and productive. Incubation allowed me to feel refreshed and ready to return to the research with a clear, passionate mind-set. I noticed, after returning, that thoughts, ideas and tacit knowledge I was struggling to grasp became more understandable and accessible. After such breaks, I noticed I either re-entered into immersion or illumination. During illumination, indwelling, intuition, and tacit knowledge allowed for core themes to emerge, influencing the direction of the research as I sought deeper understandings. This dance between incubation, illumination, and immersion was complemented by the processes and guided me towards explication and creative synthesis.

### ***Explication***

Once new dimensions and themes are illuminated, the researcher enters into a phase where they deeply explore components that have come into awareness (Sultan, 2018). Ultimately, Moustakas (1990) claimed, explication is the process of many things coming together; indicating the end of the research is impending. Explication involves the researcher actively bringing together and detangling the different pieces and components of the research. There is an on-going, developing awareness of what is occurring; research discoveries begin to unfold and pieces begin to fit together as the researcher fully examines all accumulated conscious information and awareness. The research begins to form a whole as the researcher is able to expand, explain, and make sense of their research findings (Moustakas, 1990).



Explication guided my findings, influencing what was extracted to later become the key themes of the data and discussion. For a long time, the findings chapter felt extremely difficult to engage with. I was waiting for clear data and direct answers to write about. After a long period of sitting and wondering, I began to realise heuristic research does not have a clear answer. There is no hypothesis to test and reject, nor is there right and wrong. There is instead the experience at this point in time. I began to think about where I was, at the moment in time of writing my findings, how I consciously considered the phenomenon and my experience, and ideas and themes began to come together. I truly felt as though I was in a place of new discovery and deeper awareness—not only for myself, but for my practice and others. As I detangled the themes, they began to merge into a new, predominant whole. My research shifted between exploring the findings and engaging in the discussion, as each part paved the way for and played off another. This process of many things coming together substantially aided in my ability to accept and produce my findings, the most challenging component of this research. Further, explication laid the foundation for my discussion and creative synthesis.

### *Creative synthesis*

Sela-Smith (2002) described the creative synthesis phase as a comprehensive realisation and expression of the essences of the research phenomenon. Creative synthesis naturally follows on from explication as the final phase of the research whereby the researcher tells their story, putting together core themes and components (Moustakas, 1990). Creative synthesis leads to a new understanding of the research phenomenon and is the realisation of the comprehensive essence of the research inquiry, where various strands of experience and understanding are integrated into a new whole through the use of tacit knowledge and intuition (Sultan, 2018).

Creative synthesis came about as I wrote my findings and discussions. Once themes were extracted and detangled, my thoughts and ideas began to flow and ebb within the existing literature, reflecting and challenging what has already been written, while offering a new and unique perspective. During this phase, many different pieces creatively came together to produce a new whole; a unique way of looking at self-disclosure within the internet era.

## **Summary**

A heuristic self-study feels appropriate for this research as I intended to enhance my own understandings of my experience through looking deeper into my own experiences and tacit knowing. Throughout the study, the philosophical underpinnings continued to guide and shape the research, as the phases and processes of heuristic inquiry laid the foundation for the research.

## **Chapter III: Literature Review**

### **Heuristically Reviewing the Literature**

This chapter consists of a heuristic literature review. Sela-Smith (2002) recognises a heuristic literature review as literature that is not exhaustive, rather, literature that has evoked a personal response within the researcher, which, in turn, develops into unavoidable questions that link the literature to the researcher and their research phenomenon. Within a heuristic literature review, reading material is selected based on its consistency with the structure, rigour and level of personal surrender that is at the essence of heuristic inquiry (Moustakas, 1990; Sela-Smith, 2002).

Such research begins through identifying with the focus of inquiry.

Throughout the end of 2019 and into 2020, articles and books that sparked interest and appeared relevant to the research were downloaded, briefly read, and stored. These articles all followed a similar theme of self-disclosure within the psychotherapeutic relationship, from both the client and the therapist's perspective. Reference lists of select articles were also analysed to find relevant data and more articles were accumulated. Key words were looked for within reference lists, such as the Internet, or the names of social networking sites. I also asked my peers if they recalled reading any papers on self-disclosure they perhaps found interesting, controversial, or influential to their practice. Over time, the number of articles I accumulated began to form enough literature to set the foundation of a critical, heuristic literature review. I found I quickly became immersed within my research phenomenon. Not only was this initial research of interest to me personally and professionally, but I began to consider and understand my own experiences on a more complex level.

To ensure enough literature had been gathered, additional, more specific searches were conducted. Key terms and key people were searched. Key terms included 'psychotherapy self-disclosure' and 'psychotherapy in the digital era'. To ensure I gathered a detailed history of ideas surrounding self-disclosure that had psychoanalytic and general psychotherapeutic underpinnings, pioneers including Freud, Anna Freud, Winnicott, and Rogers were specifically researched. To source relevant articles, I searched each author by name, then selected seemingly relevant articles. Search engines Psychoanalytic Electronic Publishing (PEP), AUT library website, and Google Scholar were used.

While a great deal of writing has been done on self-disclosure, I specifically focused on self-disclosure within the psychotherapeutic setting. I sought a range of articles that covered different aspects of self-disclosure; for example, self-disclosure as both a tool and a hindrance to therapy from the therapist and the client's perspective. Articles relevant to the research included critically exploring how practice has changed over time, and therapy within the digital era. Key words including 'psychotherapy' and 'Internet' were kept in mind, to ensure I stayed true to my focus of inquiry. By gathering contradicting arguments and different viewpoints, I aimed to include a broad yet detailed view of the many different components of self-disclosure.

When selecting articles, I first read the abstract to assess suitability. The articles that seemed to fit with my research question and area of interest were downloaded for additional analysis and deeper reading. Articles that did not appeal or lacked relevance to the research question were excluded. Journal articles and academic books were considered as relevant literature for the review. Articles published since 2000 were of most relevance; however, research published prior to 2000 was considered, specifically for addressing the history and foundational underpinnings of self-disclosure.

An abundance of literature was found on self-disclosure, whereas less literature was found on practicing as a psychotherapist in the digital era. Reflective of the heuristic process, I sought depth, rather than breadth, of materials; thus, after reading titles and abstracts, 20 articles and 5 books were selected based on their perceived suitability to the research, genuine interest to me as a researcher, and the articles ability to evoke more questions within me that felt in line with my research phenomenon, influenced by tacit knowing. After reading the articles, reflective of the inclusion/exclusion criteria, some were eliminated and others were kept for deeper analysis. Articles excluded from the review included those that did not speak specifically about psychotherapy, focused solely on the client's experience of self-disclosure, or felt out-of-date with current culture. While staying true to my exclusion criteria, some articles that were not included in the review were still read in an effort to expand my knowledge and understandings, challenging my tacit knowledge and leading towards intuition, indwelling, immersion, and illumination. Once the final set of relevant articles had been read through, intuition allowed tacit

and explicit knowledge to meet, enhancing my ability to notice and engage with recurring themes and patterns within the literature.

Interestingly, only a handful of the chosen articles considered the therapist's online presence. A vast amount of research focused on how self-disclosures impacted the client, and the therapeutic relationship, whereas less focused on types of disclosures, and the impact on the therapist. This research was not in line with the focus of inquiry, which is interested on the therapist's experience of self-disclosure within the digital era. Staying true to my internal frame of reference, I felt able to continuously refer back to and connect with the research question, focusing on self-disclosures specifically in relation to the therapist, and how this phenomenon has changed alongside the rise of the Internet. Different types, and the history of self-disclosure, were considered, whilst the focus remained on how having an online presence, which unwittingly contributes towards an increased risk of self-disclosure, impacts the therapist.

### **Beginning at the End: Directions for Future Research**

It feels fitting to begin this review where other pieces of writing usually end: suggestions for future research. There appears to be a distinct gap in the literature, highlighted by a number of researchers, involving limited consideration of how having a digital presence impacts psychotherapeutic practice and the nature of self-disclosure. Audet and Everall (2010) and Ziv-Beiman et al. (2017) suggested future research would benefit from focusing on self-disclosure in regards to clients' perception of disclosures and how different types of disclosures impact different clients; whilst Myers and Hayes (2006) claimed considerations for self-disclosure need to be made within the cultural context of the client and the therapist. Taylor et al. (2010) highlighted the need for research to assess and compare how self-disclosures discovered through the Internet might affect the therapeutic relationship in ways similar to other forms of self-disclosure. Similarly, Dixon and the Psychopathology Committee of the Group for the Advancement of Psychiatry (2001) and Råbu et al. (2016) stated future research should consider how times are rapidly changing; we need to be open to and develop new and different ways of practice in order to fit into the ever-changing world. As such, more research and professional conversations are needed to further explore the topic of how the Internet is shaping

and influencing our work in, and experiences of, psychotherapy.

### **Self-Disclosure: A Brief History**

“The physician should be impenetrable to the patient, and like a mirror, reflect nothing but what is shown to him” (Freud, 1912, p. 331). Early definitions of therapist self-disclosure are limited to Freud’s (1912) definitive metaphor that the therapist should be like a mirror, showing nothing more than what has already been shown, remaining otherwise neutral (Gibson, 2012; Myers & Hayes, 2006). This classic psychoanalytic stance of nondisclosure was intended to allow the patient’s projections to be more readily identified and analysed in the transference. Hence, rigorous guidelines against self-disclosure in analytic work emerged, leading to psychoanalytic concepts of anonymity, abstinence, and neutrality. It is classically viewed as the therapist’s responsibility to maintain their non-disclosing stance, emphasising their role in maintaining therapeutic boundaries (Dixon & Psychopathology Committee of the Group for the Advancement of Psychiatry, 2001). Classic psychoanalysis considers therapist self-disclosure as an amateurish error, counterproductive to intervention and a sign of the therapist’s deficiency, and was also considered a slippery slope towards sexual client-therapist relations (Gibson, 2012; Myers & Hayes, 2006; Tanner, 2017; Zur et al., 2009).

Classic psychoanalytic thinkers consider neutrality, abstinence, and anonymity as the axes of psychoanalytical technique, the foundation for transference analysis, and the only way to examine the unconscious of another (Cohen, 2005; Knox & Hill, 2003). Such space allows for the emergence and projection of the client’s unconscious, as the therapist’s neutrality is interpreted as a ‘blank-screen’ able to take in projections (Tanner, 2017). For intervention to be successful, classic psychoanalysis believes the client’s processes must not be overwhelmed with information about the therapist’s personal life; the point of the therapist revealing little is so the client can reveal more (Knox & Hill, 2003).

Freud (as cited by Knox & Hill, 2003) claimed client knowledge of the therapist’s personal life inhibits the client’s ability to develop transference to the therapist; the more the client knows about the therapist as a person, the less pure the transference is. Classic psychoanalysts believed knowing personal information about one’s therapist would prevent clients from developing and transferring phantasies, leading to a reduction in the success of intervention; as when clients are faced with

the reality of the therapist as a person, they are less able to free-associate or connect with their unconscious. Therefore, therapists should not disclose anything that may interfere with the client's phantasies or transference, highlighting the need for total anonymity in order for classic psychoanalytic methods to be effective (Zur et al., 2009). Additionally, if client phantasies become obstructed, the transference is considered contaminated and hindered, irrecoverably distorting the therapeutic alliance and compromising the effectiveness of intervention (Tanner, 2017).

While Freudian ideas went unchallenged for many years, the idea of complete anonymity has shifted, and the therapeutic value of therapist self-disclosures has become more widely recognised (Cohen, 2005). Analysts, such as Ferenczi (1933), noted complete anonymity could be perceived as a therapist seeming disinterested in or oblivious to clients' needs. Through remaining anonymous, Ferenczi (cited by Epstein, 1995) believed the analysis may potentially be ignoring or invalidating client's experiences, negatively impacting intervention, even traumatising clients. Rogers (1947, as cited by Myers & Hayes, 2006) viewed therapist self-disclosure as an essential part of the therapeutic relationship, which allowed for the therapist's expression of feelings to clients. Similarly, Winnicott (cited by Dixon & Psychopathology Committee of the Group for the Advancement of Psychiatry, 2001) viewed therapy as a creative process that could only move forward when the client feels an attachment to their therapist. Such attachment is required in order for clients to feel safe to take healthy risks that would lead to change within the intervention.

Winnicott (1947) practiced with the belief intervention is incomplete if the therapist does not reflect upon countertransference responses at some point during intervention. However, Winnicott also claimed there is a long period of time where the analyst's view cannot be appreciated by the client, as the client lacks the capacity to identify with the therapist. Therefore, the disclosure of feelings should be withheld until the client is able to take on, process, and work with them; reflecting intense feelings poses extreme risk and must be done with caution and consideration so as to not overwhelm anxious clients (Winnicott, 1947). As reflected in his work, Winnicott believed disclosing feelings, such as countertransference, enabled therapists to remain in the here-and-now that is pivotal of psychoanalytic work.

Even so, therapist self-disclosure appears to be a lesser-utilised therapeutic tool; many therapists remain trained not to disclose, or to do so sparingly (Knox & Hill, 2003). However, some classical analytic ideas may now be considered as rigid

rules of technique, a product of their time, that do not account for client's individuality. Such rules of technique appropriately came about when they were considered essential, as practitioners entered into a new way of working intimately with others (Cohen, 2005). Indeed, these ideas and rules were possibly appropriately implemented as the result of inappropriate disclosures pioneering analysts made, such as unethical disclosure of intimate feelings. Thus, classical objections to self-disclosure were indeed plausible (Epstein, 1995; Myers & Hayes, 2006). While the disclosure of intimate feelings is still deemed unethical, the viewpoint that all boundary crossings are unethical has been challenged by contemporary practitioners (Zur, 2004). While boundary crossings can inevitably lead to violations, that is not to say all and any failure to adhere to rigid boundaries and an emotionally distant form of therapy will ultimately foster exploitive and harmful relationships. Self-disclosure instead covers a range of topics and ideas that can both enhance and hinder intervention.

### **A Contemporary Perspective**

Contemporary perspectives recognise the implementation of self-disclosure as a tool, whilst also recognising the risks. Contemporary perspectives highlight a magnitude of considerations, such as recognising ideas of total neutrality and anonymity no longer reflect the true essence of psychotherapeutic intervention, and claiming the idea that we have full autonomy over self-disclosure is an ideal, not a reality (Gibson, 2012; Tanner, 2017). Therapists are faced with constant choices about what and how much to disclose, managing the delicate ethical balance between the helpfulness of sharing a part of themselves with another, and the recognition of the risk of over or inappropriately sharing (Epstein, 1995; Myers & Hayes, 2006; Tanner, 2017). Ultimately, ethical and appropriate self-disclosures allow the therapist to present themselves as a real person with a range of emotionality on the premise this will bolster therapeutic conditions necessary for client growth (Knox & Hill, 2003; Ziv-Beiman et al., 2017).

When thinking through the lens of child and adolescent psychotherapy, ways of working embody different components than adult psychotherapy (Zur et al., 2009). Self-disclosures and boundary crossings may occur more frequently in order to create an age-appropriate alliance; rigid avoidance of any self-disclosure may appear cold and impersonal to young clients. Similarly, therapists who work with



different cultures, such as indigenous cultures who may value a more collective, holistic approach to therapy, may unintentionally hinder the therapeutic alliance, nullify trust and render therapy ineffective if self-disclosures are not incorporated into the intervention (Zur, 2004).

### **Types of Self-Disclosure**

Whilst self-disclosure is often narrowly viewed as personal information that therapists intentionally and verbally reveal to clients, definitions are actually much broader. Self-disclosure in psychotherapy is broadly defined as the revelation of personal, rather than professional, information of any kind by a psychotherapist to a client (Dixon & Psychopathology Committee of the Group for the Advancement of Psychiatry, 2001; Knox & Hill, 2003; Myers & Hayes, 2006; Ziv-Beiman et al., 2017; Zur, 2015; Zur et al., 2009).

Deliberate self-disclosures are the therapist's conscious, willing revelation of personal information about themselves to clients, and can be verbal disclosures or observable actions. There are two types of deliberate self-disclosure. Self-revealing is the disclosure of information by therapists about themselves. Self-involving is disclosures made about the therapeutic relationship where the therapist shares their experience of being with the client, including therapist's personal reactions to clients and occurrences that take place during sessions (Cohen, 2005; Zur, 2015; Zur et al., 2009). Non-deliberate, benign self-disclosures involve the therapist unwittingly revealing information about themselves, such as the way they dress or speak, or spontaneous non-verbal cues (Zur, 2015). Such disclosures are normal parts of human existence and relationships, but, nevertheless, may have clinical significance that practitioners should take into account (Dixon & Psychopathology Committee of the Group for the Advancement of Psychiatry, 2001; Zur et al, 2009). Accidental disclosures include therapists' unplanned responses to clients, or unexpectedly seeing clients outside of the therapy setting (Zur, 2015; Zur et al., 2009).

Appropriate, ethical self-disclosures are intentionally employed with the client's welfare in mind and with a clinical rationale (Taylor et al., 2010; Zur, 2015; Zur et al., 2009). Thus, disclosures are not always necessary or appropriate (Cohen, 2005) and should be made with the goal of enhancing or preserving the therapeutic alliance, while linking into and primarily focusing on the client's processes (Tanner, 2017; Ziv-Beiman et al., 2017; Zur, 2004). Inappropriate self-disclosures are often

done for the benefit of the therapist, and can be burdensome and overwhelming for clients, such as therapists discussing their own hardships (Zur, 2015; Zur et al., 2009). The types of disclosure are summarised in Table 2.

**Table 2. Types of Disclosures**

Type of disclosure	Theme and type
Disclosure of facts	Early connection, self-revealing, self-involving
Disclosure of feelings	Therapist presence, engagement with therapy, self-revealing
Disclosure of insight	Therapist presence, self-involving
Disclosure of strategy	Therapist presence, early connection, self-involving
Disclosure of reassurance / support	Therapist presence, engagement in therapy, self-involving
Disclosure of challenge	Engagement in therapy, therapist presence, self-involving
Disclosure of immediacy	Early connection, therapist presence, engagement in therapy, self-involving

Modified from Knox and Hill (2003).

### **Impact on the Therapeutic Relationship**

Therapist disclosures have multiple and far-reaching effects, including being an effective way to reach clients and create change, whilst also having the potential to irreparably damage the therapeutic relationship (Audet & Everall, 2010; Cohen, 2005; Tanner, 2017). Therefore, practitioners should recognise the benefits of self-disclosure as well as its dangers (Dixon & Psychopathology Committee of the Group for the Advancement of Psychiatry, 2001). Many theorists (Audet & Everall, 2010; Cohen, 2005; Epstein, 1995; Knox & Hill, 2003; Lehavot, 2009; Myers & Hayes, 2006; Tanner, 2017; Taylor et al, 2010; Ziv-Beiman et al., 2017; Zur, 2004; Zur et al., 2009) have highlighted the myriad of positive and negative components of therapist self-disclosure, as summarised in Table 3.

**Table 3. Facilitating and Hindering Aspects of Therapist Self-disclosure**

Themes	Facilitation	Hindering
Early connection with therapist	Comfort	Feeling misunderstood
	Egalitarianism	Therapist at centre-point of the therapy
	Feeling understood/un-judged	Interfere with the transference
	Building rapport Creating therapeutic alliance	
Therapist presence in the relationship	Attentive	Role confusion
	Responsive	Uncertainty
	Reassurance	Role reversal
	Genuine	Fulfilling therapist narcissistic gratification
	Positive	Undermining the client
	Honesty	
	Trust Accessible	
Engagement in therapy	Taking risks in therapy	Feeling overwhelmed with the relationship
	Closeness in relationship	Ruptures in the alliance
	Engaging in meaningful work	
	Modelling	
	Normalizing experiences	
	Challenge ideas and behaviours	
	Create space for deeper insight	
	Create an environment of co-participation	
	Shifting power play	

Modified from Audet and Overall (2010).

## **The Internet and Self-disclosure in Psychotherapy: The World is Changing, and We Need to Change with It**

In a short time-span, the Internet has irreversibly changed the nature of self-disclosure and psychotherapists' transparency, as the concept of disclosure and entitlement towards information has become broader and more complex (Zur et al., 2009). The introduction of the Internet to healthcare practice has presented unique ethical and safety issues for therapists. Search engines and social media have completely changed the way clients can obtain information about their therapists; with a simple search, clients can find a wealth of information about their therapists online. Currently, the impact of the Internet on clinical practice is yet to be fully understood.

Zur et al. (2009) claimed in light of the ubiquity of the Internet increasing the likelihood that self-disclosure will occur, therapists need to reconsider ideas and understandings of self-disclosure. Therapists must be vigilant in a new way about issues of self-disclosure, confidentiality, and safety, as the Internet has hugely expanded clients' easy access to personal information about their therapist, challenging ideas around transparency and entitlement (Taylor et al., 2010; Zur et al., 2009). Even when structured guidelines around self-disclosure are implemented, the Internet can potentially counteract even the best of intentions on the part of an ethical therapist (Taylor et al., 2010). Previously clear and implementable privacy boundaries have become blurred as technology has enabled clients to obtain information about therapists, even if such information is not directly or purposefully disclosed. Thus, Dixon and Psychopathology Committee of the Group for the Advancement of Psychiatry (2001) and Gibson (2012) suggested practitioners should proceed from the assumption that clients know far more about them than they have ever intentionally disclosed.

Concurrently, while self-disclosures that take place over the Internet are thought to be largely unavoidable and should be dealt with in a direct manner, it is often difficult to know that any disclosure has been made, meaning it is difficult to directly deal with the disclosure (Taylor et al., 2010). As therapists do not always have control over, or knowledge of, what is published online, consequently they neither control nor know what clients may find out or know, increasing the risk of accidental or inappropriate disclosures (Gibson, 2012; Zur, 2015; Zur et al., 2009). The question becomes not whether to self-disclose, but how to manage the Internet-

driven self-disclosures that have become almost inevitable.

Therapists do well to actively manage online profiles, taking reasonable actions to avoid or prepare for foreseeable problems with online activity. What might once have been unlikely to catch clients' attention can now be promptly retrieved; thus, making technologically informed decisions can help to protect therapists online (Gibson, 2012; Zur et al., 2009; Taylor et al., 2010). This includes periodically searching one's own names in order to keep track of one's online presence, removing or editing old or incorrect information, increasing privacy settings, or deactivating personal accounts (Zur et al., 2010). Yet, Taylor et al. (2010) argued even with precautions, the widespread availability of search engines makes virtually any therapist easy to research, reducing therapists' control over when, where, and how clients may encounter online information.

Zur et al., (2009) recognised we live in an era where clients can easily access information about their therapist, due to the Internet. As clients have become informed consumers who want to know what they are getting for their money and time, therapists have become providers. Clients/consumers can be expected to look up information about therapists (or potential therapists), and have available to them an increasing array of information, additionally empowering the client to question and expect transparency (Dixon & Psychopathology Committee of the Group for the Advancement of Psychiatry, 2001; Gibson, 2012; Zur et al., 2009). Zur et al. (2009) considered searching therapists as a routine and due diligence approach for most informed modern consumers, and even a prerequisite for successful intervention outcomes. A curious client may conduct an appropriate Internet search to discover information about a particular therapist, such as professional background information, specialities, qualifications, or reviews.

In our modern era of consumer rights and consumer power, it is legitimate and common for clients to want to transparency with where they invest their trust, hope, and money (Zur et al., 2015). In response, the therapist has become the provider. It is increasingly common for psychotherapists to have their own controlled professional websites, or to be featured on the websites of organisations for which they are employed; presenting oneself online as a friendly, warm, and competent clinician is considered a basic marketing strategy in our digital era (Taylor et al., 2010; Zur et al., 2009). However, online searches may lead clients to a magnitude of online activity outside of the professional realm, such as therapist's personal social

media, blogs, or involvements that have perhaps been published online with or without the therapist's knowing or consent, potentially crossing therapeutic privacy boundaries (Zur, 2015).

Clients intruding into psychotherapists' personal lives in the Internet age may feel scary, making us (therapists) feel vulnerable and more exposed than ever been before. However, cultural and generational changes, alongside computers and wireless technology, have become increasingly prominent means of communicating, meaning we, as therapists, can also embrace the opportunity internet self-disclosures offer us with respect to treatment.

### **A Generational Perspective**

The ever-changing process of psychotherapist self-disclosure due to internet technologies touches on an increasingly relevant and timely topic for psychotherapists. The Internet has become an indispensable and frequently used tool by clients and therapists alike for both professional and personal purposes (Lehavot, 2009). This number will only grow and continue to change with future generations, specifically relevant among COVID-19 with the rise of countywide lockdowns, further highlighting the importance of considering the Internet's place within psychotherapy.

As the Internet continues to experience growth and increase in popularity, current and new generations of therapists are more likely to engage with the Internet and social networking sites. Taylor et al. (2010) claimed the correlation between age and having online presence is intriguing for a number of reasons. The current generation has grown up with the Internet; making online personal disclosures part of everyday life. This activity is so automatic that new therapists may need support in examining online activity thoughtfully through a clinical lens. Thus, training programmes should provide guidance in considering how online activity intersects with professional roles, considering implications of online disclosures (Lehavot, 2009). Normally, early career therapists look to more experienced therapists in situations of uncertainty, but if experienced therapists are unaccustomed to social networking, they are perhaps not likely to recognise, understand, or be able to provide helpful consultation on this matter. Taylor et al (2010) explained this phenomenon may be underestimated, misunderstood, or overlooked by more experienced therapists, as therapists with the least amount of professional experience

will be facing some of the most complex situations regarding the distinction between professional and private online information.

## **Conclusion**

Self-disclosure has been in the psychoanalytic vocabulary perhaps since the beginning of psychoanalytic practice. Freud made significant considerations in regards to the impact of therapist self-disclosure on the client/therapist relationship, appropriate to the time as practitioners entered into a new way of working intimately with others. Whilst Freudian ideas remain steadfast in classic psychoanalysis, some ideas have been challenged as contemporary theorists recognise the immense value of appropriate self-disclosure on the therapist/client relationship, and the risk of unethical disclosures. What was perhaps not anticipated, least of all by Freud, was the impact technology, specifically the Internet, would have on the practice of psychotherapy, specifically self-disclosure. It appears the Internet poses a unique challenge to ideas surrounding self-disclosure. Societal norms expect people to have a significantly higher online presence, and consumers (clients) expect increased transparency from services they engage with (therapists). Additionally, it is interesting to consider how this issue is ever-changing, due to the differences each generation faces with respect to the vast development of technology.



## Chapter IV: Findings

### Introduction

Through this study, I intend to better understand my own experience of being a psychotherapist who has a significant online footprint; finding a balance between having my anonymity taken away from me, while attempting to own my experience and incorporate it into my practice. Everything I have thought about and engaged with during this research process has been done with these ideas in mind. This chapter will address the themes that emerged throughout the research. The themes are based on data gathered in a range of ways, most predominantly through journaling responses, ideas and conversations based upon the foundation of pre-existing literature. These themes evolved into my findings, influencing later discussion.

Similar perhaps to psychotherapeutic interventions, Moustakas (1990) saw the goal of heuristic inquiry as exploratory discovery, where there is no hypothesis testing, no established paradigm, no idea of where the researcher or research is going. Instead, heuristic inquiry is based on the trial-and-error process of the discovery of what works; the outcome of psychotherapy research is what outcome measures happen to measure (Stevens, 2018). Despite the initial appeal of heuristic inquiry, this aspect was one I struggled to completely trust and embrace, leading to a significant halt in the research. For so long I asked, what are my findings? What am I actually here to say? What are the results? I felt as though there had been no ‘actual’ research, meaning there were similarly no ‘actual’ results, due to the lack of quantitative research components with which I was more familiar, such as a hypothesis and tests. This sits in line with a notable challenge of psychotherapy research; as mentioned, this type of research does not follow the same assumption of other areas of research, whereby there is a lack of a linear logical correlation between process variables and outcomes (Stevens, 2018). Whilst shifting between incubation and indwelling, I began to realise the findings came from an inconclusive place within me. I began to realise there is no ‘end’ point in a heuristic inquiry. Even once the research is ‘complete’, we are on a continuous journey of self-discovery, specifically when working in fields such as psychotherapy. I kept seeking the ‘end’ point, a point where I could look back and be able to clearly specify, yes, that is the research, and now here are my findings. However, that is simply not the nature of

heuristic inquiry. Instead, the realisation that this research shall remain ongoing, that I am, for now, writing about what is relevant at this moment in time, prompted the findings.

Sela-Smith (2002) claimed having a time limit negatively impacts heuristic inquiry, as the research is driven by time, rather than being driven by authentically engaging with the phases. This perhaps captures some of my stuck-ness; I wonder if I was ready to engage with each phase when I did, or perhaps the time limit gave me the push I needed to face challenging themes. Due to the nature of heuristic research, the results are ever changing as we experience, learn, and understand more, altering our perceptions. The same heuristic research, done at a different time, could yield different results. I felt as though I wanted to wait until I was at a more 'enlightened/sure/knowing' place before indwelling and detangling the findings. However, my understandings will continue to change, and the idea of 'enlightenment' is instead a phantasy. Perspectives continuously shift as there is always more to learn, discover, and understand. A fundamental component of psychotherapy work is the ability to sit in the unknown, parallel to heuristic research. To patiently sit, wait, and wonder in an effort to seek answers. This, at times, can be a difficult process, and an embodiment of some of the stuck-ness I faced while attempting to write this chapter.

## **Theme 1: Choice: How the Internet has Impacted Practice, and How it has Impacted Me as an Individual, and as a Therapist**

### ***1.1 Lack of Choice***

Within the scope of self-disclosure, at the centre is choice. Should I, or shouldn't I? Will this knowledge best serve the client and the therapeutic relationship? As established in the literature review, therapist self-disclosure is a helpful, yet sparingly used, therapeutic tool, which provides potential to both facilitate and hinder therapeutic interventions (Knox & Hill, 2003). There is choice in what therapists may choose to reveal with clients, and there are also unavoidable disclosures, such as the way one looks or speaks.

The key point of difference in my experience is I have felt as though that choice and autonomy has been stripped. While I can still choose, in a certain moment, when to disclose something about myself, I am continuously wondering what is already known. Whilst self-disclosure, when utilised appropriately and

ethically, is an arguably valuable therapeutic tool, I have been disempowered from using that tool as it was intended. Instead, it is replaced with anxiety. Wondering if they already know, if they are pushing me to reveal truths about myself, wondering what they think of me. I worry I will be far from the metaphorical 'blank slate' onto which clients project, and instead may be viewed as fragile or incapable of the work I aspire to do. Thus, part of this anxiety is my own fear of how others will respond to my trauma.

There is a need to disclose to some people, for example in new friendships or relationships, perhaps even when interviewing. For instance, I disclosed in my initial interview for this course about my experiences. However, whilst this topic does not often come up in therapeutic relationships, there have been times where knowledge of my family has been inquired. While a simple yes or no seemed to suffice, anxious wondering underlies all of these discussions. I often find myself wondering if they are asking as they know, or if the enquiry comes from a place of innocence, of genuine curiosity.

There is part of me that feels the desire to disclose as a process of authenticity, in an effort to model what it means to be a complex human being; to live unapologetically, experiences and all. My experiences have shaped me into the person I am, and to shy away from them is to hide a foundational aspect of my being. This continues to be a difficult space to sit: see me, faults and all, while I simultaneously hide away these 'imperfect' parts of my being. This empowerment is perhaps what unconsciously brought me to my topic: taking back my autonomy to be able to talk about my own experiences as I see fit in a way I want to, rather than simply assuming people know, letting people find out and draw their own conclusions based on what they find online. Part of the fear is people think they know my experience based on information that is available online. They come to their own conclusions which I may contradict when I speak my truth. Instead, I find I succumb to their ideas, rather than have the autonomy within myself to find my own path, breaking away from the stigmas published online. This has been in an effort of self-protection. If I do not expose my true self, my true self will not see harm. However, I have found by hiding my true self, I am the one who is unwittingly causing harm. I do not have to disclose the full extent of my experiences, but finding the autonomy to validate and empower my true, authentic self will only increase authentic practice, while guiding my grief process.

## *1.2 Making My Own Choice*

A stand out moment of self-disclosure occurred in 2020, when presenting my topic in the dissertation class. By choice, I was amongst the first to present. I was terrified of judgement, criticism, of not being able to do my topic justice. I felt torn in two different directions, needing to disclose my trauma in order to validate my research, yet wanting to withhold in an effort for self-protection and preservation. Again, I had the underlying worry of what do these people already know about me? The assumption that they do already know contributed towards the stress of the presentation.

When the time came for me to present, I chose to simply say ‘trauma’ or ‘traumatic experience’ when talking about the instances of my life that are available online. However, in the moment, I simply could not withhold. To not disclose would be an injustice, not only to my research but to myself and my experiences. This research does not exist without my experience; it is meshed, interwoven. When presenting, I became extremely emotional. I felt vulnerable, and an intense protectiveness over my research. However, I needed people to know this experience was so much bigger than me wanting to have social media pages and an online life. I needed them to know how much information about me was out there, and how it was completely out of my control, without my consent, what the content was, and the relevance to me. It was simply bigger than myself, perhaps a parallel process to my own understanding of my trauma. In line with heuristic inquiry, through disclosing my trauma I was learning what disclosing was like. Only by doing and experiencing did I learn and come to a new understanding of self-disclosure. Finding the strength to speak my own truth in the face of suffering has been a paramount crux of this heuristic process.

When people inquire about publishing my research, some have been in support, while others suggested perhaps I do not publish, as this writing will contribute towards my online footprint. I am constantly reminded of the irony that I am writing a very personal piece about my life, experiences and struggles with self-disclosure due to the Internet, that may well end up being published online. However, in the bravery I have felt to write this research, I feel a similar bravery in my desire to publish, as at the unconscious core, this research was perhaps my attempt to take back autonomy. This is a piece of writing, done by me, in my own words, talking about the impact of my experience, as I attempt to gain back

autonomy. The Internet is a place to find out about people, so here I present information you may have found already, but it is from me, an authentic, first person, unapologetic and unique description, whereby I have finally found the opportunity to speak to my experience. The overall experience I am writing about is public knowledge, available to all whom may come across it. However, this research is my thoughts and ideas, not those fabricated by various media outlets. This writing is purely about me, by me. Other publications lack the same genuine authenticity, influenced by other lenses. This is me talking of my experience, at this point in time, a unique piece of work. My truth may differ, if this research were done 5 years previously, or 10 years in the future. However, this research is my perception of my experiences, how it impacts my life and practice right now.

To not consider publishing my research contributes towards the stigma that trauma should not be disclosed, that it should be something to hide away from and kept separate from the other components of my life, perhaps reinforcing my own ideas that my experiences need to remain separate from my work as a psychotherapist. However, that simply cannot happen. My experiences are ever-present in the work I do and the more I try to separate them, the less authentic my work and practice will become.

## **Theme 2: My Interpersonal Associations and Experiences of the Internet and Self-Disclosure**

This theme was the most challenging for me to confront. I avoided it for a lengthy period, wondering if it would be possible to completely avoid, phantasising that one day I would return to my writing to simply find it done. I wondered if I could write my discussion first, continuously procrastinating until I realised, to do my research justice, I must face these challenges. Perhaps this is the only moment I felt regret in doing a self-study; I had chosen this methodology, so, in ways, I felt as though this pain was self-inflicted. The process of conducting a self-study, at its core, involves looking at the experiences of the self, the 'I-who-feels', connecting and making conscious tacit dimensions with tacit knowing, enhancing the researcher's ever-growing self-awareness and self-knowledge (Sela-Smith, 2002).

Part of the heuristic process, such as when in the phase of indwelling, has meant constantly revisiting and going deeper into my trauma, to places and in ways I have not explored before, facing it in ways I have previously been unable to, in an

effort to do my research justice. Part of my avoidance of this theme was due to the internal pain it caused me to sit with the pain of my grief, revisiting it time again. While it was fundamental to the research, underneath it all I am still only human, feeling the emotional toll as I continue to pull myself out of incubation phases in my journey towards creative synthesis.

### ***2.1 Trauma***

At the core of this research is the interpersonal experience of trauma. A psychoanalytic definition of trauma is an actual or perceived threat of death or injury to the self or other, alongside inescapable feelings of fear and helplessness (Parth et al., 2014). Trauma is the result of a gap between a threatening situation and one's ability to cope, enhancing feelings of helplessness, negatively impacting one's view of the self and the world (Parth et al., 2014). A common feature of trauma is the separation from or loss of something that is felt to be essential to life, overwhelming the person with the realisation of death and annihilation (Garland, 2018). Freudian terms would recognise this loss as the death of the ego; the loss of a part of our psyche that is essential to life. Events are deemed traumatic based on one's own experiences (Parth et al., 2014), meaning what is traumatic for one person may not be considered trauma by another, based on factors such as internal resources and the availability of appropriate response and support networks following the trauma. Therefore, coming to an understanding that you have been through a traumatic experience may help facilitate in understanding thoughts and behaviours, as they relate to the trauma.

This theme is the one which holds the most power over my research, my practice, and my life. Within, lies the idea that my trauma has made me weak, unworthy, incapable. Through not disclosing, I am attempting to conceal these undesirable parts of myself. However, is concealing really helpful, or is it harmful to myself, and, in turn, to those with whom I am in relation? Am I withholding in an effort to protect others, or in an effort to avoid confronting parts of myself I would prefer to keep hidden?

My experience of trauma has been a journey over the past 10 years. Trauma can be all consuming, some days more so than others. There were times where it was fused with my identity, and I became lost within it. I spent my adolescence not

feeling like my true self, instead seeing myself as a product of my trauma, damaged and struggling. Prior (2004) described this as intolerable aspects of being a victim, which includes overwhelming feelings of powerlessness, helplessness, loneliness, disconnect, and feeling inescapably bad. Now, in my work as an aspiring psychotherapist, I am regularly faced with trauma; others' trauma, alongside my own trauma, brought forward in the countertransference. This is especially relevant with adolescent clients, as I find myself intensely feeling their adolescent pain and anguish within the transference/countertransference during sessions. Trauma is complex and multi-layered; in my experience, there is the original trauma, the actual, overwhelming death of my sister, and then the secondary, perceived trauma, stemming from the grief: my fear of judgement and rejection. Whilst the trauma remains a core part of who I am, it is not a part I want or chose; thus, I have attempted to put space between my authenticity and my experiences. I am still faced with a struggle; whereby I want to hide this part of myself away, deny its existence, unable at times to distinguish between the primary and the secondary trauma. Underlying this struggle is the fear others may not be able to see past my experiences—perhaps as I have not been able to see past it at times in my life.

The disclosure of trauma in a therapeutic relationship naturally has greater implications than lesser disclosures, such as disclosing one's favourite movie. Intense disclosures have the potential to alter the whole relationship (Cohen, 2005). In my everyday life, I often do not have a choice in my disclosure. Often, I find people already know, or soon find out. As time has gone on, this has become less frequent. However, it was my experience for so long and is now a schema I have when entering into new relationships; they already know, or will soon. This is enhanced by the fact my experience is an easily searchable event. The facts are online, covered by a range of news websites, blogs, and other online sources. Whilst I would not often choose to disclose this experience, specifically as a therapist, I have come to accept this choice is, at times, out of my control.

## ***2.2 Not Knowing***

A significant part of my experience is the anxiety surrounding not-knowing. Due to the rise of the Internet, I do not know what clients already know, or discover in their time working with me. Managing and containing my own anxiety surrounding this

issue, whilst being a containing presence for clients, is a struggle I face. I also wonder, when confronted with the unknown, do I unconsciously shape myself into who I think my clients think I should be? Bringing authenticity to practice will be unattainable, if I continue to try to fit a mould that I think has already been set for who I should be.

I often wonder how my experiences, specifically my grief process, would impact me had it not been so widely covered by news agencies. Would this anxiety of not-knowing be as present, or would it have manifested in other ways? It is difficult to find avenues of respite when you open the Internet browser or switch on the television and see your own family as the headline news story. Whilst I recognise that has not been a recent incident, it remains an occurrence. I often find, specifically when meeting new people, I am waiting to be recognised, possibly confronted or questioned. Will they recognise or remember my name, somehow connecting the dots? When they do make the connection, how will they ask? Albeit from a place of empathy, it is not always received in such a manner due to the intensity of my personal trauma.

Further, the way in which the media reported on my trauma contributes towards the not-knowing. The story was covered in a range of ways, by different media outlets, in a number of countries. If clients do come across information about my family, it is out of my control as to how truthful and accurate the information they received is. Contributing towards my anxiety and the not-knowing is the knowledge that a number of publications wrote stories based on what they knew at the time and their own internal frame of reference, rather than factual truths and conclusions. Do my clients know information close to the truths, or have they learnt of my experiences through inaccurate news stories?

### ***2.3 Judgement***

Reflective of the fear of the un-known is judgement. Ideas of judgment can be influenced by one's superego; our internal guide of what is ethical and moral, laying the foundations for the expectations and norms to which we abide (Freud, 1912). Failure to meet the demands of one's superego can lead towards feelings of guilt, shame, and failure. The way in which I judge myself, and the way in which I believe others judge me, has a significant influence on my practice. Underlying this is the



fact I do not know upon which premise my clients are judging me. Are they judging me based on the way I present myself within the therapeutic relationship, or are they judging me influenced by things they already know, such as information they have gathered about me from online sources? As trauma overwhelms existing defences in a way that provides confirmation of one's deepest fears, anxieties and phantasies (Garland, 2018), the main judgements under consideration are pity, envy, and a sense of rejection.

### **2.3.1 Pity and doubt.**

A key component of my reluctance to self-disclose comes from the fear of perceived incompetency; people will not want to work with me, or think I am unsuitable or incapable of doing the work I am doing due to my experiences.

Relevant to the field of child and adolescent psychotherapy, which involves family work, I worry clients, specifically clients' parents, will read of my experience online, which may lead to negative viewpoints of me both as a person and a therapist. The concern is they will see me as a product of my trauma, someone who is fragile; who, if they take on any more grief, will crack and break. I am fearful that due to what people have read online about my experiences, they will fail to take me seriously as a professional, instead believing my viewpoints as influenced by my specific trauma. They may take pity on me, even feel sorry for me, withholding in their own therapy as to not overwhelm me. If I cannot bear these rejectable parts of myself, how can I be expected to tolerate the unbearable components of clients' lives that are projected onto me? However, I often wonder if other people view me as broken and fragile or is that the tacit way in which I view myself? I wonder, am I so tied up and all consumed by my own trauma, that I am unable to see myself as whole, as strong?

### **2.3.2 Envy.**

The idea of envy feels like the most difficult to explain. My fear is that if clients learn about my experience online, they may develop a negative view point of themselves. Often, I have had people compare their experiences to my own, stating things like 'it is not as bad as what you went through', invalidating themselves. I fear my clients may feel invalidated in their own trauma, as it may appear less intense

than mine. I fear they may also see the professional, therapist side of me, and feel an intense invalidation, potentially causing a huge shift in dynamics within the therapeutic alliance. How can you trust someone, and have a good working therapeutic alliance with them, if they make you feel invalidated in your experiences? Due to the Internet removing my power and autonomy to disclose in a way I feel will be enriching for the clients, I fear they will instead come to their own conclusions.

### **2.3.3 Rejection.**

Underlying the pity, envy, and judgement is the fear of rejection; from my clients, their families, potential workplaces, professional relationships. Perhaps also the notion I will continue to reject parts of myself. However, how can I ask people to accept me, when I cannot fully accept parts of myself? When I reject these parts of myself, it is me, and only me, who sends out the idea that there are parts of me that are unworthy, to pity, that are broken and fragile. I am so concerned with being seen as bigger than my experiences, that I send the message that my experience makes me rejectable and unworthy. I am aware many of these anxieties, these un-knowns, come from an anticipated fear of being judged and rejected, rather than actually being judged or rejected. I wonder, if I could judge myself less, would I be less fearful of others judgement, less expecting and anticipating? Would I instead be able to find more peace and acceptance within myself, and within my role as a therapist?

### **2.4 Grief**

“In mourning it is the world which has become poor and empty; in melancholia it is the ego itself” (Freud, 1924, p. 246). This quote from Freud’s foundational paper ‘*Mourning and Melancholia*’ speaks well to relationships with grief. At times, my world felt poor and empty. At times, that emptiness came from within. Engaging in the research process has been to reconnect with that emptiness, to sit with it, comfort it, and find peace with it, without letting it be all consuming, as it once was. This section is absolutely the most difficult to confront; yet, the findings felt incomplete without addressing grief. Throughout this research, I have had to stare my grief in the eyes, to look into its soul, venture into its heart, without letting it engulf and consume me—something I am terrified of. This avoidance is perhaps

linked to the components of my grief I am yet to address. Although it has been a number of years, the grief is ever present and ongoing. This research has involved grappling with my grief in a new way, analysing its many layers, when, really, I have been working so hard to avoid considering it to this depth. In having my autonomy surrounding self-disclosure altered, there are additional grievances in the process. I perceive I am grieving my idea of being the ‘perfect’ therapist, the complete blank slate, the Freudian mirror, for clients to project themselves onto. However, what makes a therapist ‘perfect’? In short, I believe, nothing. The notion of a perfect therapist is instead a phantasy, an impossible standard I set myself.

I am also grieving my ability to have complete choice and control in my self-disclosures, due to my experiences being available online. However, instead of dwelling on the grief and the lack of autonomy, I instead strive to take autonomy in what I can control, such as my response to clients finding out information about me online, or choosing to disclose my experiences in my own way, at appropriate times during therapy with clients. With grief comes loss, but loss does not equate to weakness. There is abundantly more to this theme to be explored; however, this dissertation is perhaps not the relevant realm for exploring the complexities of my relationship with grief.

### **Theme 3: Seeing the Light: New Experiences of the Internet and Self-Disclosure**

I cannot continue to reject the parts of my experience that I find intolerable. They will continue to exist regardless. It is a core part of my identity, a guiding factor. However, that is also all it is—a factor—not my complete and total identity. It continues to be a part of myself I struggle to face. Not out of shame or guilt, but out of concern that others would not be able to see past my trauma; similar to how I, at times, view myself. As I recognise the ways in which my experiences guide me, I know the work I do is not solely due to what I have been through.

#### ***3.1 Acceptance and Balance***

Two words that have been present throughout this study are balance and acceptance. The point where I feel safety within the disclosure will be preceded by balance and acceptance. To be okay, to sit with the uncertainty of disclosure, I must first accept this part of myself. This is a journey I am still on, and I do not know if there will ever

be a certain, conclusive end point, as is the way with heuristic research. The heuristic research process has, however, been central in my acceptance process.

What has been a journey for me has been accepting trauma as a core part of my experience, whilst previously feeling as though it was something to hide, despite its prevalence within my identity. Part of my anxiety is the concern others may not be able to look past my trauma; instead, reducing me to my experiences, failing to see my strengths independent of the trauma, not in spite of it. While my experiences have influenced where I am today, they are not the only contributing factor. My experience is out there for the world to know. The more I hide from it, the more shameful it becomes. Through accepting this stigmatised part of myself, I can begin to break down those ideas that were bequeathed to me by the media. I can begin to tell my own story, from my own perspective. This is only the beginning. There will continue to be judgement about my experience. The way it was portrayed in the media has been, on a whole, inaccurate. So here I am, attempting to take back some power and autonomy, to share a version of events, leading towards the path of acceptance. Honouring my truth allows for unconscious freedom; both from my own judgment and criticism, and the fear of judgement from others.

Underlying these fears and anxieties is my own perception of my trauma. In others, I see how their experiences have shaped them into the person they are today. The lessons they have learnt, their triumphs, their downfalls. Then why, for myself, do I feel as though my trauma has made me weak, and worry that others will share that opinion of me? Why do I believe that others' trauma has given them strength, yet mine has broken me to the point of no return, to the point I could not possibly be an adequate therapist, that others only see pity in my experience? The more I reject these parts of myself, the more I am sending the message I have shame and something to be ashamed of, contributing towards the stigma that domestic violence is to be kept behind closed doors, something shameful, known about but not discussed. Through disclosing, through breaking away from this shame barrier, I feel tacitly afraid. However, afraid does not equal weak. To feel the fear and persevere is the foundation of bravery.

In order for my clients to accept me, I must first accept these components of myself. This will continue to be a challenge for me. Through accepting my experience, am I unwittingly accepting domestic violence? Am I sending the message that it is okay? No. This is part of the balance. I can accept this experience

and the events in my life, without accepting the sum of its parts. To accept myself, I must first recognise there are parts of myself I wish to conceal—to not disclose or expose to others, out of fear of rejection and other ideas highlighted previously. However, am I avoiding these parts of myself, as I think they are intolerable for other people, or do I find it intolerable to acknowledge these parts? I often feel as though I will not be able to accept the intolerable aspects of my experience until I have come to fully understand and process my experience. Yet, to think that will one day come about is to live in phantasy, as is the way with trauma, and, in parallel, heuristic research. There is no real end point, no final realisation. As we learn and grow, so too do our perceptions and understandings. Acceptance, for me, comes from accepting myself at this point in time, seeing myself as a whole person; to view myself as bigger than what is available about my life online is to bring more authenticity to my life, to my work, to myself.

There will always be a balance, a conscious wondering. Part of therapeutic tools such as self-disclosure must question ‘who does this best serve’? However, when I withhold, rejecting this part of myself that is fundamental to my being, it feels like a disservice to myself, to my ability to bring authenticity and genuineness to my practice, hindering my own and my clients’ unconscious processes. There will always be balance. To disclose does not necessarily mean going into the intense personal details of my own processes, I can instead choose what parts of my experiences to reveal. Within this comes the balance. I do not have to reveal the entirety of my experience; instead, I can disclose what is relevant, at a specific moment in time. Due to the information available online, I feel as though to disclose must be to disclose everything, as intense details are public knowledge. However, the more I have come to sit with my experience, the more I have come to recognise the balance. While the information is available online, what, when and how much I wish to disclose lies within myself.

### ***3.2 The Internet as a Tool***

The way in which the Internet has changed psychotherapy practice will be further analysed in the discussion. What feels significant is the need to highlight the way in which the Internet is shaping not only psychotherapy, but healthcare practice going forward. The Internet has made practice possible, specifically unique to 2020, with many lockdowns and the discontinuation of face-to-face services. Without the

Internet, many people would have been completely disconnected during what was already a lonely, troubling time. While the Internet has the potential to pose problems, such as permanently changing the way in which we consider self-disclosure, it also can no longer be separated from healthcare practices. Through online connections, potential clients can make informed choices as to the availability and appropriateness of potential therapists, which has the potential to dramatically enhance treatment outcomes. As established, some disclosure is needed and unavoidable, such as stating credentials and training, and other aspects, or one's ethnicity. Practice is changing, and we must change with it in an effort to provide ethically apt treatment. The Freudian notion of being a blank slate, a mirror on which to be projected, does not hold up within the transparency of the Internet era. Instead, perhaps therapists are becoming more of a window; clients can still see themselves reflected back to them, yet also see there is more beyond the glass. Whilst encouraging neutrality, we cannot deny the parts of ourselves we bring into the therapeutic relationship. To deny aspects of ourselves and our experiences is to essentially deny the transference/countertransference process, the core of psychotherapeutic interventions (Goldstein & Goldberg, 2004; Lanyado & Horne, 2009; Schmeets et al., 2008; Tsiantis et al., 1996), thus denying an authentic, ethical, just intervention.

## **Summary**

In this chapter, I have attempted to speak to the themes that emerged during this heuristic study. Through a continuous, non-chronological process of immersion, incubation, illumination, explication, and creative synthesis, three themes were extracted and, at this point in time, were the ones that felt most relevant and applicable to the research, and to my experience of self-disclosure. The extraction of the themes, and later discussion, were brought about through the combination of tacit knowing, intuition, indwelling and focusing, all while working within my internal frame of reference.

Trauma, envy, judgement, grief, and the unknown were considered. What brings these terms together is fear. Fear of judgement, of envy, of grief, of the unknown. Fear was explored, highlighting the anxiety I am faced with in regards to my online presence, self-disclosure, and therapeutic relationships. Choice,

acceptance, balance, and the Internet as a tool were also explored. Core findings, influenced by creative synthesis, recognised without incorporating these values, my practice will continue to lack true, genuine authenticity, as I am denying a part of myself within the process. While this continues to be an area for me to consider, the more I work towards acceptance and balance, the more of my authentic self I can bring to therapeutic relationships.

## **Chapter V: Discussion**

### **Introduction**

This discussion begins with a brief summary of the findings, before drawing critical links between the findings and the literature reviewed in chapter three. The findings will be briefly considered in relation to psychotherapy, such as their place within existing or future psychotherapeutic theory, practice, training, and research. Study strengths and limitations will be reviewed, and suggestions offered for future research. Throughout, the relevance for this study for me, the sole researcher and participant, will be considered through a heuristic lens, whilst drawing upon generalisable implications.

### **Another Standstill**

As I come to discuss the research, I once again find myself at a standstill. Similar to my difficulty in realising the findings, I ponder their implications. What are they? How does something I have written fit into a vast field of research? Are my findings even important, relevant to the world? On a tacit level, I know they are, and I am once reminded of Stern's (1985) ideas of language. Whilst finally being able to begin to verbalise some of my unconscious anxieties, preceding this, each time, is what Stern described as a wedge between what is spoken about, and what is known. This wedge can cause separation, having alienating implications on the self-experience as what is attempting to be discussed still remains in one's tacit, unconscious awareness and the intersubjective relatedness is yet to be able to be verbalised. Such inability to adequately verbalise one's experience can cause conflict, as the explainable and acceptable is perhaps not always one's true self-experience. Thus, our ability to verbalise, or not, our experiences may cause estrangement from the experience's true essence, which may remain, in parts, unconscious.

Again, this fits within Sela-Smith's (2002) critique of heuristic research, wherein she claimed this type of research should not be bound by deadlines. Once again, I find myself wondering where this research may have gone, had it not had the constraints of time; if I could have spent more pure time truly letting the phases and processes of heuristic inquiry guide my journey. Regardless, whilst the notion to re-enter another phase of incubation is most appealing, this is a time for reaching



conclusions and shaping answers, guided by creative synthesis. Further, once access is made, wholes that were formed out of limited or flawed awareness can be reconstructed by new, corrected, complete, or reinterpreted information, and the meanings that propel our lives can be transformed (Stern, 1985). This discussion is an attempt to create a new whole, built out of my own experiences in an effort to think about what is known in new, creative ways, continuing to shift tacit into conscious. This is in no means final, as is the nature of both heuristic inquiry and life in the digital era.

### **Brief Summary of Findings**

My experience of self-disclosure is undeniably linked with my online presence which, in turn, is undeniably linked with my experience of trauma. My online presence is, in a large part, out of my control. It was created without my consent and goes in-depth into a version of my trauma. As a result, I experience a level of anxiety in therapeutic relationships, constantly wondering about unknowns, whilst dealing with a range of responses mainly associated with a fear of judgement linked to my grief process. Whilst my online presence inevitably increases my risk of perhaps inappropriate self-disclosures within the therapeutic relationship, this is yet to be fully understood. For now, the findings highlight how, as a therapist and on a personal level, I struggle with the anxiety of the unknown, in regards to self-disclosure, my online presence, and my practice as a psychotherapist, all in relation to my experience with trauma.

Freud (1961) explained within one's psyche it is the superego that provides the ethical, moral standards by which we operate. The superego begins to develop in childhood and continues development until adulthood, as one becomes accustomed to societal norms. The superego lays the foundations for one's idealised version of the self, and can be critical if one fails to meet demands or live up to perceived expectations. Feelings of guilt and anxiety often follow as a form of internal punishment, if one fails to live up to superego expectations. Prior (2004) explained that traumatised young people often develop a harsh superego, as experiences, such as trauma, can alter the course of superego development. When one's internal view of the self is distorted, they may often fail to meet the expectations of their superego, leading towards continuous feelings of guilt and failure. This can present in a range

of ways, such as the child repeating abusive behaviours modelled to them, or treating themselves the way in which they believe their abuser should be treated. Often, young people will internalise aspects of their trauma or abuser, developing an internal bad-self, which becomes reinforced when there are repeated instances of trauma. Thus, traumatised children often believe, in some ways, they have caused or contributed towards components of the trauma and therefore deserve some form of punishment. Prior (2004) further explained that traumatised children often feel as though they must live as a victim or as an abuser; both of which feel intolerable, contributing towards feelings of powerlessness and disconnect.

Likewise, it appears my anxiety mostly stems from an internal source, perhaps an overactive, critical superego, or an internalised 'bad-self'. Due to internalised negative ideas, I have tacitly communicated to myself that my clients and colleagues will perceive me in a similarly negative way, only viewing my internalised traumatised 'bad-self' whom they will reject or take pity on, rather than seeing me as bigger than my experiences. This perception is linked with my fear of the unknown; I do not know what people know about me, and I perhaps unconsciously fall into the victim mindset, reinforcing perceived negative internal ideas about my own abilities. Since these unconscious notions have come more into conscious awareness, I hope to continue to challenge this tacit 'bad-self', whilst also addressing the intolerable aspects of being a victim. Such awareness has enabled me to look deeper into that feared part of myself, eliminating its power and control, nurturing mental and emotional growth, whilst bringing more empathy, forgiveness, and authenticity into my life and practice.

### **Linking the Findings**

The Internet and its impact has seemingly altered the notion that the therapist should be a mirror; "reflect nothing but what is shown" (Freud, 1912, p. 331). Whilst respecting Freud's ideas as a foundational, fundamental product of their time, vital to pioneering psychotherapy (Cohen, 2005), they appear rigid within today's technologically-enhanced world. It feels virtually impossible to maintain the same level of anonymity that was emphasised to pioneering theorists, many of whom would struggle to comprehend the Internet, and its impacts. Whilst neutrality remains a fundamental value within psychotherapy, anonymity has seemingly been replaced

with utilising self-disclosure as a tool when appropriate, or withholding, managing, or repairing ruptures when disclosures impinge upon the client's processes (Gibson, 2012). Thus, ideas proposed in this research fit within more contemporary notions which, overall, suggest some aspects of self-disclosure are an unavoidable aspect of the therapeutic relationship, with potential to both help and hinder intervention outcomes. Contemporary researchers (Audet & Everall, 2010; Knox & Hill, 2003) continue to highlight both the risks and benefits of self-disclosure within psychotherapy. When used ethically, tentatively and appropriately, self-disclosure can be a therapeutic tool, facilitating the development and maintenance of trust within the therapeutic alliance, whilst recognised risks include overwhelming the client and role-reversal, which often have detrimental implications for intervention outcomes (Zur et al. 2009; Zur, 2015).

The ways in which practitioners can attempt to manage their online presence include making technologically informed decisions and keeping track of one's online presence in an effort to protect one's privacy (Gibson, 2012; Zur et al., 2009; Taylor et al., 2010; Zur et al., 2010). However, these boundaries become blurred when the content of personal information online is out of the therapist's control. This contributes to my fears and anxieties around not-knowing. As research suggests, practitioners should practice from the assumption clients know more about them than has been directly disclosed (Dixon & Psychopathology Committee of the Group for the Advancement of Psychiatry, 2001; Gibson, 2012). Am I thus to approach each new therapeutic relationship as if there is a pre-existing knowledge of my trauma? Taylor et al. (2010) claimed it may be difficult to know when online disclosures are made, as clients may not be forthcoming with this information. Instead, it may play out in other ways, such as in the transference/countertransference. This places emphasis on the idea that therapists should be prepared for these disclosures and conversations to come about during the therapy.

In the instances of intentionally telling clients about trauma, it would be considered a deliberate, self-revealing disclosure, whereby I intentionally shared with my client a personal detail about my life, outside of the therapeutic relationship (Cohen, 2005; Zur, 2015; Zur et al., 2009). Specifically, the disclosure of trauma may be considered a disclosure of intimacy, used to facilitate trust in the relationship, through demonstrating the therapist's presence and engagement (Knox & Hill, 2003). However, disclosures of intimacy have a higher likelihood of shifting the focus from

client to therapist, with detrimental effects to the therapeutic relationship, including altering the focus of the intervention, overwhelming the client or role-reversal (Audet & Everall, 2010; Knox & Hill, 2003); meaning, whilst it may be appropriate in some contexts, a therapist disclosing their own intense, interpersonal trauma would mostly be considered inappropriate, due to the potential risks. In contrast, clients finding out information online would be considered an accidental disclosure as the therapist likely did not actively intend to offer such personal information to the client (Zur, 2015; Zur et al., 2009). It is more challenging to distinguish the ethics of accidental self-disclosures. As the name explains, they are accidental and cannot always be avoided or managed. These disclosures are possibly not made with the client's best interest in mind and can be revealing or confronting, feeling burdensome for both client and therapist (Zur, 2015; Zur et al., 2009). In regards to my own online presence, I do find components of it burdensome, and remain aware of the fact clients knowing this information may place a burden on them. In part, the burden is played out in the unknown anxiety. I feel burdened, bringing my own countertransference to the relationship, wondering what clients may know about me, waiting for the imagined confrontation. Combined, this contributes towards the anxiety, the fear of the unknown, and the fear of judgements.

This ongoing unknown is something I am continuously learning to manage. Whilst I do not have control or autonomy over what a client may find out about me online, I do have control and autonomy over how it may be worked through within the therapeutic relationship, such as my own response and ability to contain accidental, perhaps inappropriate, self-disclosures. I can feel victimised, giving in to my harsh superego, believing they are judging or taking pity. Or, I can use this knowledge to enhance the alliance and intervention outcomes.

### **Implications within Psychotherapy**

Ideas proposed within this study have many implications within psychotherapy training and practice, which, in turn, open the door for new areas of research, adding to or altering pre-existing psychotherapeutic theory.

### *Training and Practice*

Explained by Taylor et al. (2010) and Lehavot (2009), the likelihood of having an online presence increases with each generation of new psychotherapists; being online has become a generational norm, part of everyday life. Whilst I did not experience the same level of exposure to technology that children in the 21<sup>st</sup> century do, I was born into the digital era and technology has always had a place in my life, whether that was at home, in my education, or in my social life. Due to this presence, Taylor et al. (2010) explained that being online is such an automatic activity for the younger generation, the next generation of therapists may need extra consideration in regards to managing the fine balance between one's personal and professional life.

In regards to training, Taylor et al. (2010) suggested earlier career psychotherapists, specifically those of a younger generation, should have guidance and support around examining one's level and content of online activity through a clinical lens. This may be in an effort to ensure there is no material, published intentionally, that may hinder one's therapeutic ability (e.g., material of a sensitive, personal nature). Training institutions may look to provide guidance and awareness of how one's online activity may become part of the therapeutic relationship, such as the implications of clients searching for therapists online. Further, in experiences wherein one may have limited control or autonomy over their online activity, training facilities may wish to re-evaluate how they approach conversations around self-disclosure within therapeutic relationships. Whilst respecting the foundational ideas of self-disclosure, training may seek to include how to manage accidental disclosures, such as ones found online, within the therapeutic relationship. As Gibson (2012) explained, it is no longer a case of deciding whether or not, or what, to disclose; it has become a case of learning how to manage disclosures within the therapeutic relationship, as clients know more and expect more from their therapist, due to the increase of online activity and transparency in the digital era. Additionally, practicing psychotherapists may begin to consider what their online presence is, and how it may impact current or future clients. Practicing therapists may choose to actively monitor or edit their online footprint in an effort to be aware of, or reduce the likelihood of accidental disclosures (Gibson, 2012; Zur et al., 2009; Taylor et al., 2010; Zur et al., 2010).

## ***Theory***

Recognising the limited applications of heuristic inquiry, this study is perhaps a starting point for considering the links between the Internet and psychotherapeutic practice, considering also the personal and professional life of the therapist or the client, and how these findings may have implications on a larger scale. This study has offered a unique perspective of the lived experience of self-disclosures in the digital era, an area of research that remains new, uncertain, and continuously evolving. The Internet is ever-changing, as is our understanding of people. Considering how the Internet is changing society may build upon existing literature, bringing ideas together in new ways, or may be a new field to study in its entirety.

## **Directions for Future Research**

Considerations for future research feel immensely vast. From considering the development of our understanding of self-disclosures within therapeutic relationships, to analysing how the Internet is changing and shaping society, there are many different research topics, analysed using different methodologies, that could be considered.

Specific to this study, as is the nature of heuristic inquiry (Sela-Smith, 2002), the same research question, done at a later date, may yield different results to those found at the current time. This is for a number of reasons, such as the interpersonal mindset of the researcher, or the global climate. Had I done this research earlier or later, my results would have been vastly different. My grief process and my ability to think about such complex entities would be different thus impacting the findings; also, we most likely would not have been amidst a global pandemic, in which we were forced online in ways never before adopted. In light of these contextual factors, I believe this research will always be present for me, perhaps something to address at another time in my academic journey, whereby the global climate and my own interpersonal perceptions, specifically surrounding my grief journey, will be at a different place of understanding.

Future researchers may see benefit in studying different types of disclosures, perhaps analysing how different types of disclosures are becoming more or less apparent in therapeutic relationships, building upon or finding new understandings of current meanings and definitions of self-disclosure in psychotherapy. Future research

may also highlight how rapidly the Internet is developing; perhaps assessing how psychotherapy training and practice is able to keep up with the demands of technology, and what adjustments are required within practice to meet the needs of a changing society, specifically as clients become consumers, and therapists providers (Gibson, 2012; Zur et al., 2009).

Finally, as highlighted by Myers and Hayes (2006), future research that incorporates cultural and generational perspectives when considering self-disclosure may seek to address existing gaps in current literature. This is something missing, and a limitation of the current research; whilst generational perspectives were considered, this research is lacking a strong cultural voice or connection, highlighting the need for future research to take such aspects into consideration.

### **Strengths and Limitations**

The strengths of this research feel extremely personal, and it would not be a complete self-study without assessing the implications of this research on me as the sole researcher and participant. Firstly, this research has helped me to address my grief in a new way. It has enabled me to address some of the things I have struggle with over the last 10 years, providing clarity, alongside the ability to see things from a new perspective through shifting tacit into conscious. I whole-heartedly believe this research has helped me progress in my grief process. Whilst at times extremely painful, perhaps contributing towards a great amount of the stuck-ness, I am able to reflect on the research and see growth—mentally and emotionally, personally and professionally. I recognise I was in a place of stability where I was ready to face some of the more challenging components of this research, and feel an internal strength to further challenge some of the ideas imposed upon me by my critical superego and, in turn, hope this will continue to enrich my growth as an aspiring psychotherapist.

Additionally, this is a unique piece of work, unique to me at this moment in time, influenced by my current mindset and perceived reality. My current understandings continue to develop as more knowledge is acquired, and as tacit becomes explicit. Heuristic inquiry is an ever-continuing process, as there is always more to learn and discover. Within, there appears to be no endpoint, which may be viewed as both a strength, and a limitation of heuristic inquiry. As explained by Sela-

Smith (2002), it does not do justice to a true self-study to be confounded by the restraints of time, as this research was. As mentioned, I wonder where this research may have gone, had the restraints not been present; however, also recognise the helpfulness of the time-limit, as, in its absence, this research may have continued to sway in-between the heuristic phases, never quite reaching this place of creative synthesis. Additionally, Djuraskovic and Arthur (2010) claimed the creative freedom within heuristic inquiry increases the risk of underdeveloped research with limited generalisable application, due to the emphasis heuristic research places on the subjective experience of the researcher, whom is the sole participant of the study. Thus, this research may not have the same robustness, validity, and applicability of more quantitative research, as heuristic findings often have limited replicability. Despite these limitations, I do believe this research has implications for psychotherapists with a digital footprint, and also for those who, like me, experienced a public trauma.

## **Conclusion**

This chapter has attempted to link the findings with literature, analysing how the ideas proposed in this research fit within existing understandings, considering how the findings may bring together new and existing ideas in a unique way, whilst also offering a new perspective of self-disclosure in the digital era. Ideas proposed in this study potentially have a magnitude of implications with psychotherapy, leading towards ideas for future research. Strengths and limitations of this study were also considered.

This research has been a year long journey. To conclude this work feels like a significant moment in time. I am, once again, at a loss for words. However, this time it is not due to the stuck-ness that has been present at different times during the research. Instead, how do I conclude what feels to be an unfinished piece of work? My journey will continue to unfold. The Internet will continue to provide challenges and changes to society. Further, I will continue to grow and develop as a therapist and as a person; and, within that, attempt to manage my relationship with self-disclosure, alongside continuing to process my grief and trauma, another component that will never finish, but will similarly continue to change.



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