

Available online at www.sciencedirect.com**ScienceDirect**

Procedia - Social and Behavioral Sciences 103 (2013) 1243 – 1251

Procedia
Social and Behavioral Sciences13th International Educational Technology Conference

Understanding the two sides of online counseling and their ethical and legal ramifications

Poh Li, Lau, Rafidah Aga Mohd Jaladin^{*}, Haslee Sharil Abdullah,

*University of Malaya
Faculty of Education
Department of Educational Psychology & Counseling
Kuala Lumpur, Malaysia 50603*

Abstract

The rise of the Internet has drastically changed the means by which people obtain information and communicate in the Malaysian society. The Internet has become possibly the most popular medium to connect with others particularly through social networking tools, like Facebook, Twitter and other. For the field of counseling, the Internet offers a new way to reach, facilitate and communicate with individuals who need help from all over the world. Little is known, however, about the implications of interacting with clients online. The purpose of this writing, therefore, is to address the possible advantages and disadvantages of online counseling, as well as ethical and legal considerations in the use of online counseling by summarizing the past research. Additionally, suggestions for better practice are also discussed so that counselors and therapists are able to have a better preparation before practicing online counseling. Overall, this writing has several important implications for counseling practitioners in Malaysia and beyond. It contributes to a better understanding of the role of the Internet in counseling practice in an increasingly electronic world.

© 2013 The Authors. Published by Elsevier Ltd. Open access under [CC BY-NC-ND license](http://creativecommons.org/licenses/by-nc-nd/3.0/).

Selection and peer-review under responsibility of The Association of Science, Education and Technology-TASET, Sakarya Universitesi, Turkey.

Keywords: Digital mind maps; paper mind maps; science; achievement

^{*} Corresponding author.

e-mail address. rafidah_aga@um.edu.my

Introduction

As the number of Internet users across the globe continues to rise, more and more resources are becoming accessible online. The possibilities of services that can be offered on the Internet are endless. Today, anybody can receive professional mental health services such as counseling online rather than through a traditional face-to-face counseling service. To date, numbers of professional individuals as well as organizations have commenced offering online counseling services to various populations of clients. This development marks the integration of technology use in the provision of mental health services. Therefore, this paper aims at discussing the possibilities and limitations of using online counseling as a modality to help needy individuals in the Malaysian context.

Online counseling by asynchronous e-mail is a primary focus, given that it is the most frequently used method of online counseling provided by counselors and therapists (Chester & Glass, 2006). There are other methods of online communication, such as private chat, text messaging and video conferencing, are famous as well as its have been used simultaneously with asynchronous e-mail. However, online counseling is a relatively new service. Hence, the long-term implications of such an experience are little known.

There are many concerned with the ethical dilemmas associated with online counseling. It is essential to identify the probable advantages and disadvantages of online counseling. Hence, this paper summarizes the existing research with respect to online counseling. Then, it outlines suggestions for conducting online counseling in a manner that maximizes its benefits and minimizes its risks. The goal is to provide information for helping professions concerning the benefaction of online counseling to clients of all ages and populations, where available.

Online Counseling

Online counseling is the transmission of therapeutic interventions in World Wide Web in which the computer-mediated communication technologies is facilitated as a medium of communication between a trained professional counselor and client. There are several terms used for online counseling including online or Internet therapy, e-counseling, e-therapy, cyber therapy, e-mail therapy, web counseling, Internet counseling, cyber counseling, synchronous single-session counseling, and therapy-e-mail.

Above all, synchronous (chat and video conferencing) and more popularly asynchronous (e-mail) communication have been used by clients. Additionally, online counseling has been provided as a stand-alone service and as an adjunct to other services. Virtual reality environments have also been used to conduct counseling whereby it's allowing both synchronous and asynchronous communication (Bambling, King, Reid, & Wegner, 2008).

Defining the term online counseling often invites controversies and sometimes becomes a continued source of debate. There are numerous definitions of online counseling which have been proposed in literature. These definitions suggest that online counseling can take many forms. For instance, Bloom (1998) describes online counseling as "the practice of professional counseling that occurs when client and counselor are in separate or remote locations and utilize electronic means to communicate with each other

Next, Mallen and Vogel (2005) provides a comprehensive definition of online counseling, "any delivery of mental and behavioral health services, including but not limited to therapy, consultation, and psych education, by a licensed practitioner to a client in a non-face-to-face setting through distance communication technologies such as the telephone, asynchronous e-mail, synchronous chat, and videoconferencing".

It has been argued that online counseling is an inversion of face-to-face counseling online, with technologies facilitating the therapeutic communication and impacting the process with their related advantages and limitations (Castelnuovo, Gaggioli, Mantovani & Riva, 2003). From this perspective, online counseling is not seeming as anew and discrete way of likable therapeutically with clients. Therefore, it is not seen as obliging a different theoretical framework from face-to-face counseling.

On the contrary, it is argued that online counseling should be considered a new type of therapeutic intervention which characterized by basically unique features (Fenichel et al., 2002). This perspective views online counseling as an adaptable and flexible resource with the potential to complement and support other types of interventions and definitely not a substitute to face-to-face interventions.

Advantages and Disadvantages of Online Counseling

No doubt, online counseling has both probable advantages and disadvantages. One of the primary advantages of online counseling is its potential for increased accessibility mental health services. This means online counseling may become the solution for potential clients with constraints to access mental health services such as those who are residing in geographically remote areas (Sussman, 2004), and also those who are having difficulties to leave their home due to certain illness, physical limitations, transportation difficulties or family commitments (Maples & Han, 2008).

In particular, online counseling may also be a constructive and therapeutic modality for those clients who have socially phobic. This include persons who are fearful to seek for a face-to-face counseling therapy due to anxiety or stigmatization (Lange, Van de Ven & Schrieken, 2003), or who are hesitant and cautious about the in-person counseling process (Barnett, 2005). Moreover, family therapists may be able to engage absent family members in family therapy with the use of computer-mediated communication (King, Engi & Poulos, 1998). Economically, online counseling services are more affordable by clients because private therapists usually offer online-services at lesser cost than the regular cost of a face-to-face counseling session (Griffiths, 2001).

On the other hand, online counseling is also a convenient service whereby it can be provided at any time of the day and clients can send messages whenever they feel most in need of or interested in therapy (Bailey, Yager, & Jensen, 2002). Essentially, online counseling is accessible from any corner of the world as long as there is Internet access (Maples & Han, 2008).

Subsequently, it also lets individuals to access therapists comfortably from their home or even office (Manhal-Baugus, 2001). Therefore, therapists have more flexibility in their work schedules as the hassles and difficulties in having to schedule a specific appointment time is lessened as the therapist and client may not have to be sitting at their respective computers at the same time (Suler, 2000). Thus, it increases a therapist's accessibility, especially for those clients with inconsistent as well as demanding personal schedules (Peterson & Beck, 2003).

Although time delay is regarded as a disadvantage of e-mail counseling as it is integral in asynchronous communications, it can also being seen as advantages. Time delay allows both counselor and client to have sufficient time to compose a thought or question that precisely reflects their concern and issue – both presenting and real issues (Tate & Zabinski, 2004). Hence, the client can reply when he or she is ready to reply in detail as there are no pressures to think hastily (Suler, 2000).

Online counseling is also able to provide a lasting and concrete record of counseling sessions whereby it can provides many benefits to both clients and therapists as a reminder of things they had expressed previously (Barak, 1999). For instance, clients are able to re-read e-mails to evaluate the methods they have used in previous issues as well as to review positive and encouraging comments that their therapist has made about them (Murphy & Mitchell, 1998). Furthermore, both the client and the therapist can fully reflect on issues discussed in previous sessions or communications (Manhal-Baugus, 2001) as well as to explore the client's progress at various stages in the course of treatment (Oravec, 2000).

Finfgeld (1999) emphasized the higher standards of accountability that can hold clients and therapists by the recordkeeping provided by online counseling. Later, a permanent record also has the potential of as a tool for both supervision and consultation (Murphy and Mitchell, 1998).

Walker (2007) underlined that the act of writing itself can be therapeutic. Writing has been viewed as a facilitative method of self-disclosure, externalization of problems and conflicts, ventilation, and essentially it can promote self-awareness (Barak, 1999). Besides that, writing may also lessen the emotional burden on individuals by allowing them to say of any kind

they want to say (Yager, 2001). It was suggested that some individuals are more honest and more expressive in writing compares to face-to-face counseling sessions.

The anonymity of online counseling may also be beneficial because being an “invisible” client can help individuals to reduce or eliminate the stigma related in seeking mental health services (Suler, 2000). This is especially important for clients with issues of shame and also for individuals who are scared of being judged. When certain social markers such as age, gender and ethnicity are removed, it may be easier for individuals to disclose information about themselves (Tate & Zabinski, 2004). Thus, clients may become more honest and sincere when they cannot see the therapist as they feel less defensive and vulnerable (Maples & Han, 2008), and feel more ease on the plausibly embarrassing and stigmatizing disclosure of behaviors and thoughts (Manhal-Baugus, 2001).

Online counseling can potentially enhance individuals’ autonomy in the therapeutic relationship as clients are able to say whatever they want to say and to initiate contact. Therefore, it can reduce the power discrepancy between client and therapist (Yager, 2001). For instance, e-mail therapy may empower clients to convey their unique ideas without interruption by the therapist’s premature phenomenology and it is particularly beneficial for clients who have been frustrated by therapists’ lack of sensitivity to their uniqueness (Finfgeld, 1999).

Some of the study revealed that online therapy can be viewed as a way to enhance traditional treatments whereby it can be used as an extended support of the clinical process such as follow up and an expansion of face-to-face counseling sessions during the central and final parts of therapeutic sessions (Castelnuovo, Gaggioli, Mantovani, & Riva, 2003).

On the other hand, chat and instant messaging can assist more direct and immediate communication in which like e-mail therapy, they also provide for constant and instant feedback in two ways. Rees and Stone (2005) emphasized that the use of videoconferencing can increase the access of mental health services to isolated and demoted populations including rural populations, disadvantaged populations, as well as individuals with disabilities.

To summarize, there are many advantages of online counseling and these include more accessibility, lesser cost, and wider clientele market. However, there are always two sides of a coin. This means that using online counseling is also subjected to several disadvantages. The following paragraphs discuss some of these disadvantages.

Initially, computers simply do not offer the human interaction that is crucial in the counselor’s office (Maples & Han, 2008). Hence, the lack of physical presence within human communication may decrease the sense of intimacy, trust, and commitment in the therapeutic relationship. Consequently, it may weaken the development of a therapeutic foundation between the counselor and the client. The absence of visual and vocal cues, such as facial expressions, body language and voice tone can result in a greater potential for miscommunication.

Peterson and Beck (2003) asserted that some crucial emotions such as sighs, frustrated emotions, terseness, irritation, to name a few, may be lost in the process of the e-mail transaction. Without sufficient presence of visual and vocal cues, therapists and clients may face difficulty, or even inability to establish a strong therapeutic relationship foundation. It would be difficult for clinicians and therapists to correctly assess and diagnose disorders without enough access to non-verbal behavior. In most face-to-face counseling, therapists heavily rely on non-verbal cues in order to explore what clients feeling or thinking (Maples & Han, 2008).

Text-based communication is also seeming to be stark and cold. It is because typed text may feel or look more formal with lacking of supportive and empathic tone (Suler, 2000). Consequently, some words may perceived and come across as sounding harsher than anticipated. On the other hand, greater potential for misinterpretation will happen as different individuals can also have difference understanding of text messages as compared to verbal exchanges (Ybarra & Eaton, 2005). In addition, misinterpret aspects of e-mail communications might happen on hypersensitive individuals who are prone to alteration of facts and events (Yager, 2003).

During face-to-face session, counselors and clients communicate mostly with facial expressions, posture, eye contact and so forth. Needless to say, reading nonverbal is an essential element of counseling. If one is being counseled online, these nonverbal signs are unobservable and their absence can be disadvantageous to the counseling process. For instance,

nonverbal signs which cannot be observed during an online session are nervous behaviors, whether eye contact is maintained or not, angle and distance of body in relationship to the counselor, to name a few.

Also, a client may be typing content which appears to be enriching, but at the same time he or she may be crying. Conversely, a client may be typing distraught messages but may be laughing while doing so. These inconsistencies in feeling, thinking and behavior are significant cues and can be a good indicator of possible mental diagnoses.

Internet access was previously noted as an advantage of online counseling, yet it can also be viewed as a limitation. It said that in online counseling, it is only available to clients who have access to a computer and the Internet. Hence, therapists who have the utmost desire to serve particularly those in traditionally underserved populations may have the least access to the desirable technologies (Barnett, 2005).

In order to fully utilize the Internet and the chosen method for example by e-mail or chat efficiently in online counseling, clients and counselors are required to have necessary skills and must be fairly good readers and writers (Abbott, Klein & Ciechowski, 2008).

In asynchronous communication, time delay is a seeming natural result. However, it is also caused from technological failure. Time delay can become an advantage in online counseling but it can also change the flow of the counseling process (Rochlen, Zack, & Speyer, 2004). Nonetheless, time delay can lead to uncertainty that may result in self-questioning or self-doubt and also frustration of the client (Maples & Han, 2008). As for time delay caused by technological failure, it may delay and interfere with the services. Subsequently, feelings of isolation and alienation may arise if a client is cut off with no means of reconnection.

Ethical and Legal Considerations in Online Counseling

In any practice of counseling be it face-to-face or online, professionals must always make room for ethical and legal ramifications of such practice. Therefore, the following are potential ethical and legal issues associated with providing online counseling services that counselors and therapists must take into consideration.

Substantially, threats to confidentiality occur at two levels in which during transmission and at the end of the session. Prior, what's under concern is that e-mails may be misinterpreted by typos in the "to" field or hacked by computer hackers (Recupero & Rainey, 2005). Later, things that must take into account are the possibility where other persons may have access to the client's e-mail, such as employers or family members and at the same time, client e-mail may be accessible to the therapist's office staffs. Other than that, the storage of transcripts of online counseling sessions by either the therapist or the client might bring up confidentiality issues (Mallen, Vogel & Rochlen, 2005).

As the era changed, the range of the Internet spreads beyond state and even international boundaries. When this happens, there will be an unclear application of laws as the client resides in a different jurisdiction than the therapist (Kanani & Regehr, 2003). Which one to be used—the jurisdiction in which the therapist is providing the counseling services or the client resides? The issue of jurisdiction also applies to the rights of clients to recompense complaints and not only to the legitimacy of the activity.

On the other hand, if the counselors and therapists are practicing outside of their jurisdiction whereby their experiences are inadequate within a given culture or a language barrier exists in the helping process it can result in competence issues. Counselors may overlook some important signs without the aids of non-verbal cues and they might make incorrect presumptions regarding the client's cultural identity. Therefore, lack of knowledge about client's cultural issues may limit counselor credibility and eventually will lead to inappropriate counseling interventions (Sampson, Kolodinsky & Greeno, 1997).

Peterson and Beck (2003) assert that clients may perceive the accessibility of e-mail to mean that the counselor's door is always open. In addition, there is an expectation that whoever, include therapists with an e-mail address is instantly available and responsive as well as reachable all the time. By that, some of the clients may continue to send the therapist e-mails although they have terminated the session or some clients may even harassing and stalking their former therapists by using the Internet. Misunderstanding regarding the nature of the relationship between counselor and client may arise as e-mail appears to encourage familiarity and spontaneity (Bailey, Yager, & Jenson, 2002).

Codes of ethics in helping profession oblige counselors and therapists to be competent in their chosen practice and have sufficient education to declare their expertise so that clients' welfare are protected as well as free from professional misconduct (Kanani & Regehr, 2003). Some therapists may not have high level of technological knowledge of computers that is requisite for online counseling. For instance, some practitioners may not have had specific training in text-based psychotherapeutic.

It is an ethical duty for therapists of various disciplines to warn or protect if clients present a danger to either themselves or others. However, it is harder to access and to intervene in an emergency via online counseling. This is because when therapy is conducted face-to-face, therapists are on hand to evaluate and manage psychological crises (Carlbring & Andersson, 2006).

Contrarily, Internet communication does not always allow or limit counselors to access the violence signs or potential of a client (Kanani & Regehr, 2003). Hence, there are possibilities that counselors failed to perceive and responded appropriately to existing communications problems. Then, as anyone can lie about their information such as age, gender, and situation, identity authentication can be an issue when working online (Ragusea & Vandencreek, 2003).

Therefore, online counseling services can provide challenges regarding to client identification (Fisher & Fried, 2003). Counselors and therapists may be facing difficulties to determine whether the client holds an appropriate mental capacity to consent because there is no pre-existing relationship between therapist and client beforehand. For instance, it is common for youth to use Internet and thus there is a likelihood whereby underage youth is using online counseling services without getting the consent from their parents or caregivers.

Essentially, instead of getting informed consent from the client it is also crucial for the client to understand the possible risks and probable benefits of a suggested intervention. However, to date the benefits of various forms of online counseling are still being examined and debated in the literature and thus it can be a difficult task to mental health and helping professions.

Barak (1999) pointed out those professionals without sufficient credentials tend to offer online counseling services as it is easy to access. Therefore, scam is much easier to constrain in the anonymous online world. Other than that, individuals whom seek for online counseling and to make an accurate decisions about which services are good and which are not good may also be difficult as there is a long list on this services at the time being.

Suggestions for Better Practice

Suggestions for a better practice based on the relevant research findings are discussed next after addressing numbers of disadvantages and ethical concern identified in online counseling. The following paragraphs discuss some of these summarized suggestions in respect of the identified disadvantages and ethical concern.

Initially, it is crucial for counselors to inform clients of the standard limits to confidentiality for example child abuse and suicidal ideation, and the threats to confidentiality regarding to transmission of information through electronic, as well as the procedures being used to protect confidentiality (Fisher & Fried, 2003). On the other hand, clients should also be informed of their own confidentiality affliction whereby they should be advised to do their online counseling in a room with privacy where they wouldn't get intruded by anyone (Ragusea & Vandencreek, 2003). Essentially, the risk of records keeping of online therapy sessions should also be informed to the clients which includes the methods and the time period of online sessions records are being retained (Kanani & Regehr, 2003). For some practicing novice counselors and therapists, there will be supervision sessions and thus clients should be made aware of the access to the records of online sessions (Oravec, 2000).

Concerning to jurisdiction issues, Zack (2008) emphasizes online counselors should be familiar with the licensure restrictions and exemptions in their jurisdiction as well as the jurisdictions in which they clients are reside. Hence, counselors and therapists shall only provide their services in jurisdictions in which they are licensed. Online therapists should also provide links to websites of all relevant certification and licensing boards. Besides, sensitivities to the diverse cultures shall develop by counselors as well. For instance, counselors must be alert in making assumptions about things such as names and expressions and familiar with clients' local cultural norms and local events.

Intake form basically contains certain information regarding to the ethnic and cultural background of the client. However, for some culture and populations, this may seem as bias part of the counselor and therapist. Therefore, Sampson Jr., Kolodinsky, and Greeno (1997) suggests if the therapist is happening to come across this unexpected situation, therapist should proceed slowly and clarifying to the client about their perceptions of thoughts, feelings, and behaviors

In online counseling, vague relationship between counselors and clients might happen. Hence, steps must be taken by the counselor in order to avoid encouraging unnecessary excessive dependence. Kanani and Regehr (2003) suggest counselors can establish a time frame for responses to maintain boundaries rather than immediate responses expected by clients. Thus, counselors and clients shall establish appropriate rules with regard to suitable use of e-mail communication.

As online counseling is different from face-to-face counseling session, tone and language might perceived wrongly by the clients. Therefore, the tone of e-mails should always be professional in which avoid anger, annoyance and other unprofessional tones. Inappropriate jokes, unprofessional social or self-disclosing statements should be avoided and counselors should use professional tone and language that is usually used in the office. It is important to note that for clients who are suffering from severe boundary problems, e-mail should not be used.

Concerning the competency of online counseling services, counselors should seek out necessary training (Zack, 2008) which cover technology, theory, applications and ethics, as well as licensing laws. Online training should also take account of skills in text-based communication and protecting client's welfare and information online. Thus, counselor shall only use online software that is within their capabilities or if new software is used to expand their competencies.

Concerning the language used in online counseling, counselors may need to develop an ability to understand the style and interpret the content of e-mails written by the client particularly youth as they have developed their own language on the Internet. This includes language that is characterized by abbreviations, spelling phonetically, and the absence of many of the rules of grammar (Fenichel et al., 2002).

Counselors can use emotional bracketing and descriptive immediacy in online counseling (Murphy & Mitchell, 1998). Emotional bracketing includes bracketing the emotional context behind the typed words in order to allow the client to hear the intended vocal tone in the words whereby descriptive immediacy includes providing the client with images for better understanding the counselor's words.

Counselors can also use spacing and pacing techniques to exercise a higher degree of control over the online counseling process. Variety of emotional nuances and facial expression can conveyed by using "smileys", emoticons and other commonly used symbols. With that, clients and counselors can develop a set of standardized emoticons and acronyms in the session. In order to prevent misinterpretations and to make sure the client understands what the counselor is saying and that the counselors understands what the client is saying, the counselor should check with the client continuously (Stofle, 1997).

It is important to note that online counseling is not suitable for individuals who are having psychosis problems. Therefore, counselors should aware about not taking on clients who are suffering from psychiatric disorders for online counseling and needing immediate attention, clients who are significantly depressed (Carlbring & Andersson, 2006), individuals who might give danger to themselves or others, such as serious substance abusers and those who presenting psychotic or actively suicidal ideation. Besides, counselors should not take on individuals who are highly reactive and potentially dangerous, such as those with borderline personality disorder, paranoia or dissociative disorders.

Concerning on crisis situations, it require quick responses and should not be addressed online whereby clients who are experiencing such situations should be encouraged to seek face- to-face counseling. Moreover, online counseling websites should disclose topics that are not appropriate for online counseling, such as sexual abuse and violent relationships. Lastly, online counseling websites should have notices for individuals who have suicidal ideation with information about hotlines, crisis centers and emergency departments of hospitals (Manhal-Baugus, 2001).

Conclusion

Overall, online counseling has both advantages and disadvantages and a number of legal and ethical considerations surrounding its offering and provision. Research in the area of Internet therapy or online counseling focuses primarily on self-help interventions with little therapist involvement and there is limited certain empirical evidence with respect to the efficacy of online counseling between therapist and client.

Online counseling is a great responsibility as is counseling an individual face to face. Both face-to-face and virtual relationship should be treated with the highest ethical professionalism. It is important to note that whenever an online client is communicating in a virtual world, his or her problems are still very much real.

References

- Abbott, J.M., Klein, B., & Ciechomski, L. (2008). Best practices in online therapy. *Journal of Technology in Human Services*, 26(2/4), 360-375.
- Bailey, R., Yager, J., & Jenson, J. (2002). The psychiatrist as clinical computerologist in the treatment of adolescents: Old barks in new bytes. *American Journal of Psychiatry*, 159, 1298-1304.
- Bambling, M., King, R., Reid, W., & Wegner, W. (2008). Online counselling: The experience of counsellors providing synchronous single session counselling to young people. *Counselling and Psychotherapy Research* 8(2): 110-116.
- Barak, A. (1999). Psychological applications on the Internet: A discipline on the threshold of a new millennium. *Applied & Preventive Psychology*, 8, 231-245.
- Barnett, J.E. (2005). Online counseling: New entity, new challenges. *The Counseling Psychologist*, 33(6), 872-880.
- Bloom, J. W. (1998). The ethical practice of web counseling. *British Journal of Guidance and Counseling*, 26(1), 53-59.
- Carlbring, P., & Andersson, G. (2006). Internet and psychological treatment. How well can they be combined? *Computers in Human Behavior*, 22, 545-553.
- Castelnuovo, G., Gaggioli, A., Mantovani, F., & Riva, G. (2003). From psychotherapy to e-therapy: The integration of traditional techniques and new communication tools in clinical settings. *Cyber Psychology & Behavior*, 6(4), 375-382.
- Chester, A., & Glass, C.A. (2006). Online counselling: A descriptive analysis of therapy services on the Internet. *British Journal of Guidance & Counselling*, 34(2), 145-160.
- Fenichel, M., Suler, J., Barak, A., Zelvin, E., Jones, G., Munro, K., et al. (2002). Myths and realities of online clinical work. *CyberPsychology & Behavior*, 5(5), 481-497.
- Finfgeld, D.L. (1999). Psychotherapy in cyberspace. *Journal of the American Psychiatric Nurses Association*, 5(4), 105-110.
- Fisher, C.B., & Fried, A.L. (2003). Internet-mediated psychological services and the American Psychological Association ethics code. *Psychotherapy: Theory, Research, Practice, Training*, 40(1/2), 103-111.
- Griffiths, M. (2001). Online therapy: A cause for concern? *The Psychologist: Bulletin of the British Psychological Society*, 14, 244-248.
- Kanani, K., & Regehr, C. (2003). Clinical, ethical, and legal issues in e-therapy. *Families in Society*, 84(2), 155-162.
- King, S.A., Engi, S., & Poulos, S.T. (1998). Using the Internet to assist family therapy. *British Journal of Guidance & Counselling*, 26(1), 43-52.
- Lange, A., Van de Ven, J-P., & Schrieken, B. (2003). Interapy: Treatment of post- traumatic stress via the Internet. *Cognitive Behaviour Therapy*, 32(3), 110-124.
- Mallen, M.J., & Vogel, D.L. (2005). Introduction to the major contribution: Counseling psychology and online counseling. *The Counseling Psychologist*, 33(6), 761-775.
- Mallen, M.J., Vogel, D.L., & Rochlen, A.B. (2005). The practical aspects of online counseling: Ethics, training, technology, and competency. *The Counseling Psychologist*, 33(6), 776-818.

- Manhal-Baugus (2001). E-therapy: Practical, ethical, and legal issues. *CyberPsychology & Behavior*, 4(5), 551-563.
- Maples, M.F., & Han, S. (2008). Cybercounseling in the United States and South Korea: Implications for counseling college students of the millennial generation and the networked generation. *Journal of Counseling & Development*, 86, 178-183. 44
- Murphy, L.J., & Mitchell, D.L. (1998). When writing helps to heal: E-mail as therapy. *British Journal of Guidance & Counselling*, 26(1), 21-32.
- Oravec, J.A. (2000). Online counseling and the internet: Perspectives for mental health care supervision and education. *Journal of Mental Health*, 9(2), 121-135.
- Peterson, M.R. & Beck, R.L. (2003). E-mail as an adjunctive tool in psychotherapy: Response and responsibility. *American Journal of Psychotherapy*, 57(2), 167-181.
- Ragusea, A.S., & VandeCreek, L. (2003). Suggestions for the ethical practice of online psychotherapy. *Psychotherapy: Theory, Research, Practice, Training*, 40(1/2), 94-102.
- Recupero, P.R., & Rainey, S.E. (2005). Informed consent to e-therapy. *American Journal of Psychotherapy*, 59(4), 319-331.
- Rees, C.S., & Stone, S. (2005). Therapeutic alliance in face-to-face versus videoconferenced psychotherapy. *Professional Psychology: Research and Practice*, 36(6), 649-653.
- Rochlen, A.B., Zack, J.S., & Speyer, C. (2004). Online therapy: Review of relevant definitions, debates and current empirical support. *Journal of Clinical Psychology*, 60(3), 269-283.
- Sampson, J.P., Jr., Kolodinsky, R.W., & Greeno, B.P. (1997). Counseling on the information highway: Future possibilities and potential problems. *Journal of Counseling & Development*, 75, 203-212.
- Stofle, G.S. (1997). Thoughts about online psychotherapy: Ethical and practical considerations. Retrieved January 5, 2013, from <http://members.aol.com/stofle/onlinepsych.htm>
- Suler, J. (2000). Psychotherapy in cyberspace: A 5-dimensional model of online and computer-mediated psychotherapy. *CyberPsychology & Behavior*, 3(2), 151-159.
- Sussman, R.J. (2004). Counseling over the Internet: Benefits and challenges in the use of new technologies. In G.R. Waltz & C. Kirkman (Eds.), *Cyberbytes: Highlighting compelling uses of technology in counseling* (pp.17-20). Retrieved January 5, 2013 from http://eric.ed.gov/ERICDocs/data/ericdocs2sql/content_storage_01/0000019b/80/1b/31/f5.pdf
- Tate, D.F., & Zabinski, M.F. (2004). Computer and Internet applications for psychological treatment: Update for clinicians. *Journal of Clinical Psychology: In Session*, 60(2), 209-220.
- Walker, M. (2007). *Mental health treatment online*. Retrieved January 10, 2013, from <http://digitalinclusion.pbwiki.com/f/Mental+Health+Treatment+Online+elec+231> 107.pdf
- Yager, J. (2001). E-mail as a therapeutic adjunct in the outpatient treatment of anorexia nervosa: Illustrative case material and discussion of the issues. *International Journal of Eating Disorders*, 29, 125-138.
- Yager, J. (2003). Monitoring patients with eating disorders by using e-mail as an adjunct to clinical activities. *Psychiatric Services*, 54(12), 1586-1588.
- Ybarra, M.L., & Eaton, W.W. (2005). Internet-based mental health interventions. *Mental Health Services Research*, 7(2), 75-87.
- Zack, J.S. (2008). How sturdy is that digital couch? Legal considerations for mental health professionals who deliver clinical services via the Internet. *Journal of Technology in Human Services*, 26 (2/4), 333-359.