PCSS Medications for Opioid Use Disorders

Providers Clinical Support System

The Power and Pitfalls of Self-Disclosure in Behavioral Healthcare: Intent versus Impact

Deana Leber George

M.Ed., LPCC-S

PCSS Medications for Opioid Use Disorders | Providers Clinical Support System

Housekeeping

- This event is brought to you by the Providers Clinical Support System – Medications for Opioid Use Disorders (PCSS-MOUD), a program funded by the Substance Abuse and Mental Health Services Administration (SAMHSA). Content and discussions during this event are prohibited from promoting or selling products or services that serve professional or financial interests of any kind.
- PCSS-MOUD aims to increase the knowledge and skills of healthcare and counseling professionals about available evidence-based treatment approaches for substance use disorder (SUD) with a particular focus on opioid use disorder (OUD). PCSS-MOUD provides free training and mentoring to practitioners on the use of medications for OUD (MOUD) and the integration of these services into mainstream health care.

Funding for this initiative was made possible by cooperative agreement no. 1H79TI086770 from SAMHSA. The views expressed in written conference materials or publications and by speakers and moderators do not necessarily reflect the official policies of the Department of Health and Human Services; nor does mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government.



PCSS Medications for Opioid Use Disorders
Providers Clinical Support System

Disclosure to Learners

AAAP is committed to presenting learners with unbiased, independent, objective, and evidence-based education in accordance with accreditation requirements and AAAP policies.

Presenter(s), planner(s), reviewer(s), and all others involved in the planning or content development of this activity were required to disclose all financial relationships within the past 24 months

All disclosures have been reviewed, and there are no relevant financial relationships with ineligible companies to disclose.

All speakers have been advised that any recommendations involving clinical medicine must be based on evidence that is accepted within the profession of medicine as adequate justification for their indications and contraindications in patient care. All scientific research referred to, reported, or used in the presentation must conform to the generally accepted standards of experimental design, data collection, and analysis.

PCSS Medications for Opioid Use Disorders
Providers Clinical Support System

Presenter(s)

Deana Leber George, M.Ed., LPCC-S

Manager of Training and Consultation

Center for Evidence Based Practices

Substance Use Disorder Center of Excellence

deana.leber-George@case.edu



PCSS Medications for Opioid Use Disorders | Providers Clinical Support System

Educational Objectives

At the conclusion of this activity participants should be able to:

1. **Define clinician self-disclosure** and differentiate between intentional, therapeutic, and non-therapeutic disclosure practices.
2. **Identify relevant ethical principles, professional codes of conduct, and organizational policies** that inform decisions regarding self-disclosure in clinical settings.
3. **Apply a structured, practical decision-making framework** to evaluate when, why, and how self-disclosure may or may not be clinically appropriate.




“What is most personal is most universal.”
Carl Rogers





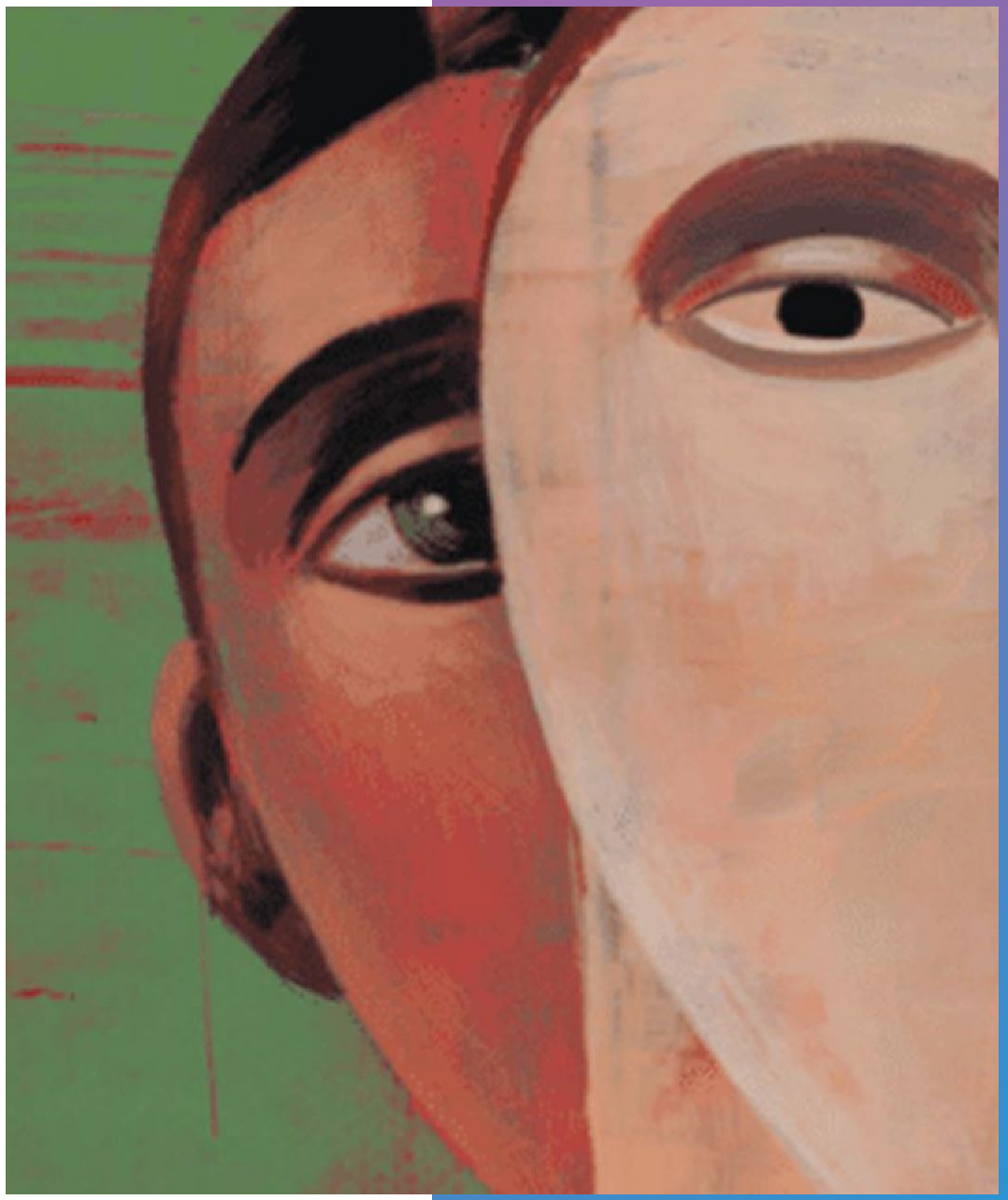
PCSS Medications for Opioid Use Disorders | Providers Clinical Support System

What Is Self-Disclosure?

Self-disclosure is intentional and clinically driven. It is not casual storytelling. The distinction lies in *purpose* and *therapeutic relevance*.

- Can include:
  - Lived experiences
  - Feelings or reactions
  - Identity factors
  - Professional experiences

- Distinct from casual conversation or boundary violations

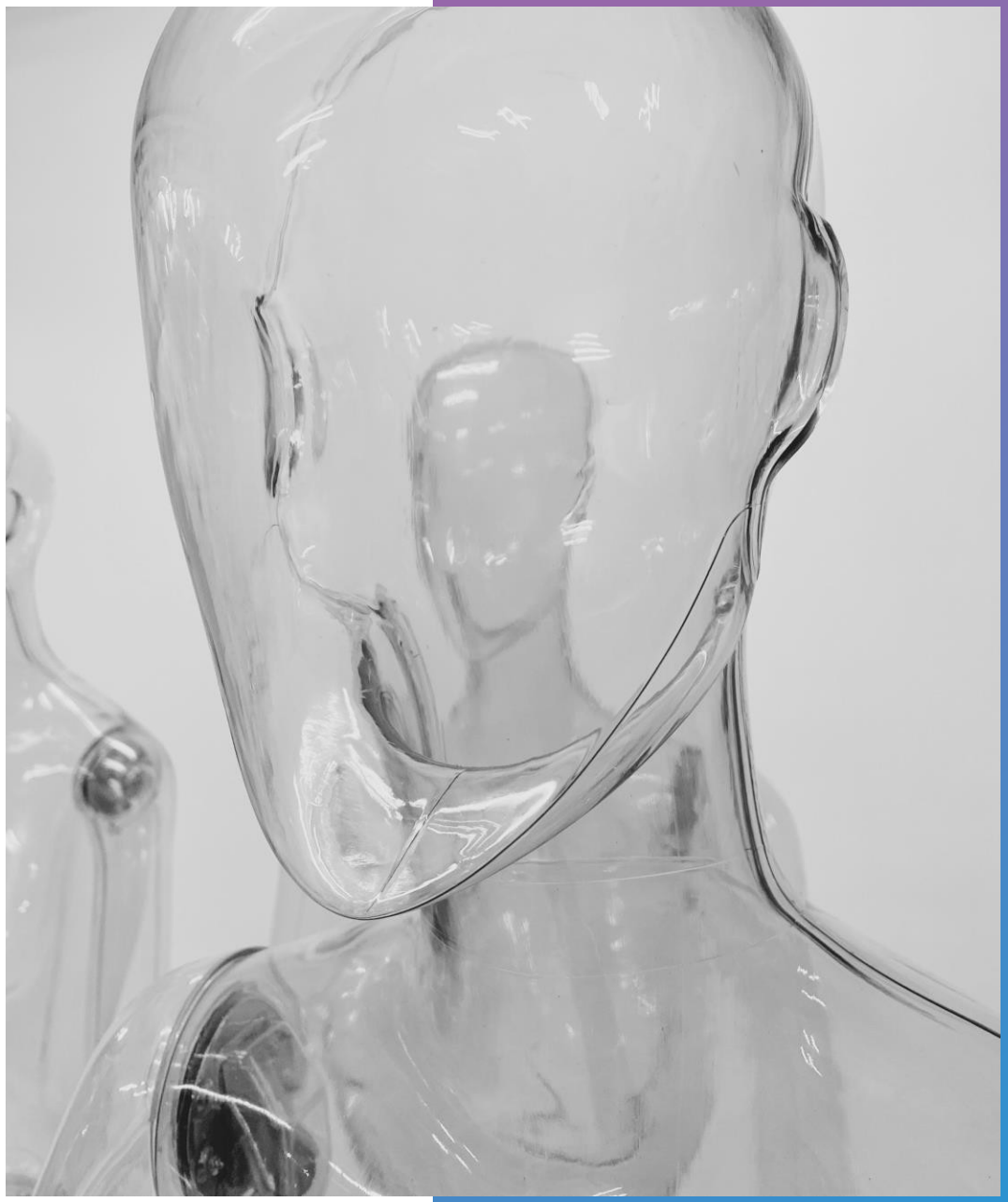


PCSS Medications for Opioid Use Disorders | Providers Clinical Support System

Why This Topic Matters

Modern care models emphasize authenticity and recovery orientation. Clients may ask personal questions, and clinicians must respond ethically rather than reflexively.

- Client expectations shifting toward relational transparency.
- Risk of ethical missteps without clear guidance.
- Relevance to trauma-informed and person-centered practice.



PCSS Medications for Opioid Use Disorders | Providers Clinical Support System

Why This Topic Matters Cont.

- Research suggests moderate, purposeful disclosure can strengthen alliance and reduce stigma - particularly relevant in recovery-oriented substance use treatment. (Corrigan et al., 2025)

- Thoughtful disclosure can *model empowerment* and help equalize therapeutic power when aligned with treatment goals.

-
    - Strengthens therapeutic alliance.
    - Enhances rapport and trust.
    - Normalizes client experiences.
    - Reduces stigma.
    - Can model coping and recovery.




“Clarity of intention is the foundation of skillful action.”
Tara Brach

PCSS Medications for Opioid Use Disorders | Providers Clinical Support System

Ethical Foundations

- **Beneficence and non-maleficence are the anchors. Even well-intended sharing can cause harm if it shifts focus away from the client or creates confusion.**

- Beneficence and non-maleficence — prioritize client wellbeing and avoid harm. Limit disclosures to what is *therapeutically relevant*.
- Autonomy and informed consent — clients should understand the nature and purpose of personal disclosures. *Redirect focus back to client after disclosure.*
- Professional boundaries and dual relationships - self-disclosure risks merging professional or personal roles when not clearly beneficial. *Consult supervision and peers for difficult decisions.*

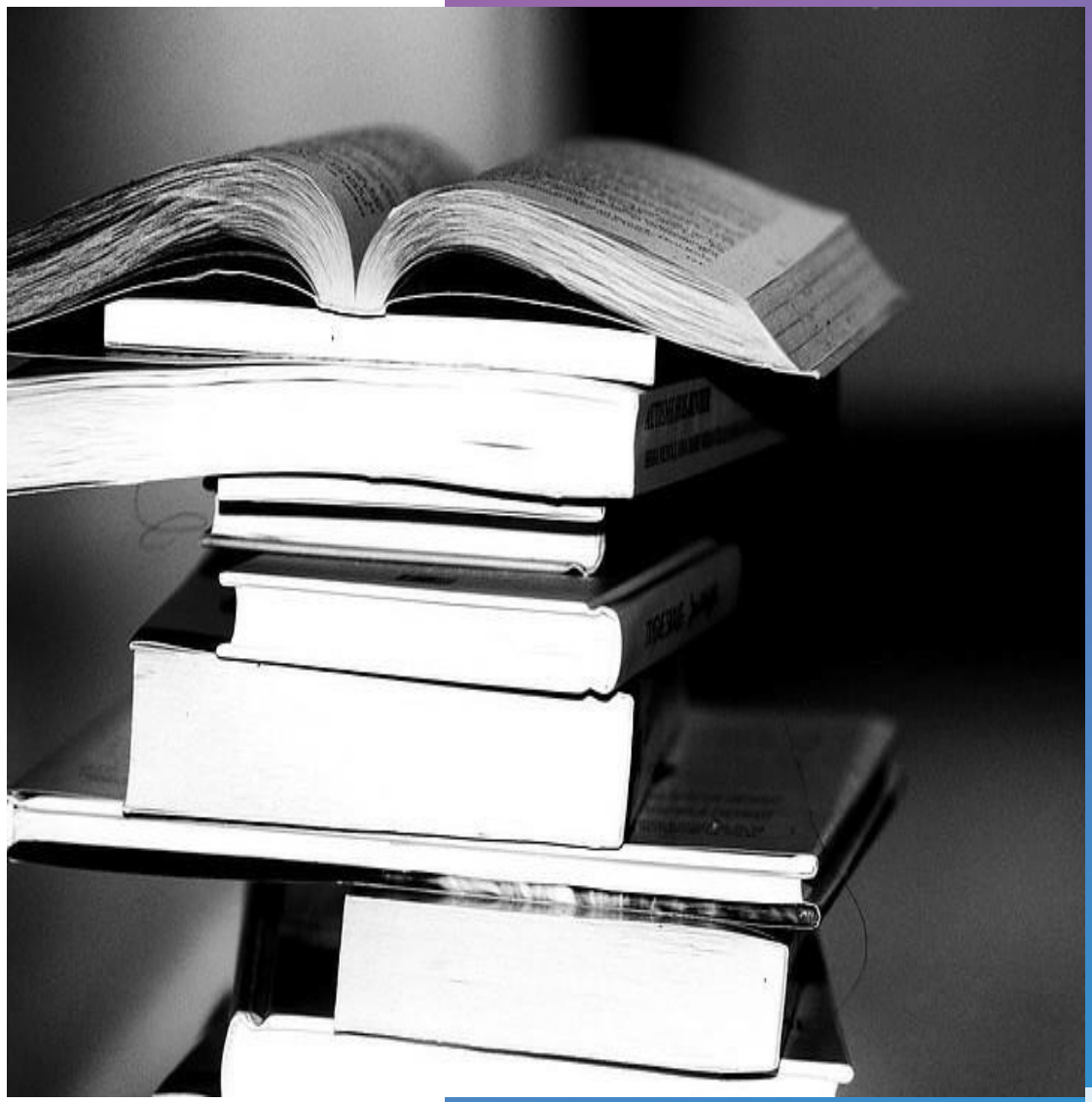


PCSS Medications for Opioid Use Disorders | Providers Clinical Support System

Professional Codes of Ethics

- Most codes do not ban self-disclosure; instead, they emphasize boundaries, client welfare, and consultation. Ethical practice is about judgment, not rigid prohibition.
- Not always specific about self-disclosure, but relevant ethical standards apply (e.g., avoiding harm, maintaining role clarity).

- ***ACA Code of Ethics, APA Ethical Principles, NASW Code of Ethics***
- Emphasis on:
  - Boundaries
  - Avoiding dual relationships
  - Client welfare
  - Competence and consultation



PCSS Medications for Opioid Use Disorders
Providers Clinical Support System

Potential Risks

Over-disclosure can blur roles, create emotional burden for the client, or unintentionally model maladaptive coping. Vulnerable or trauma-exposed clients may be especially sensitive.

- Shifts focus from client to clinician.
- Boundary confusion.
- Client dependency or role reversal.
- Misinterpretation of intent.
- Potential harm to vulnerable populations.





“Between stimulus and response there is a space…

In that space lies or freedom and our power to choose our response…

In our response lies our growth and our happiness”

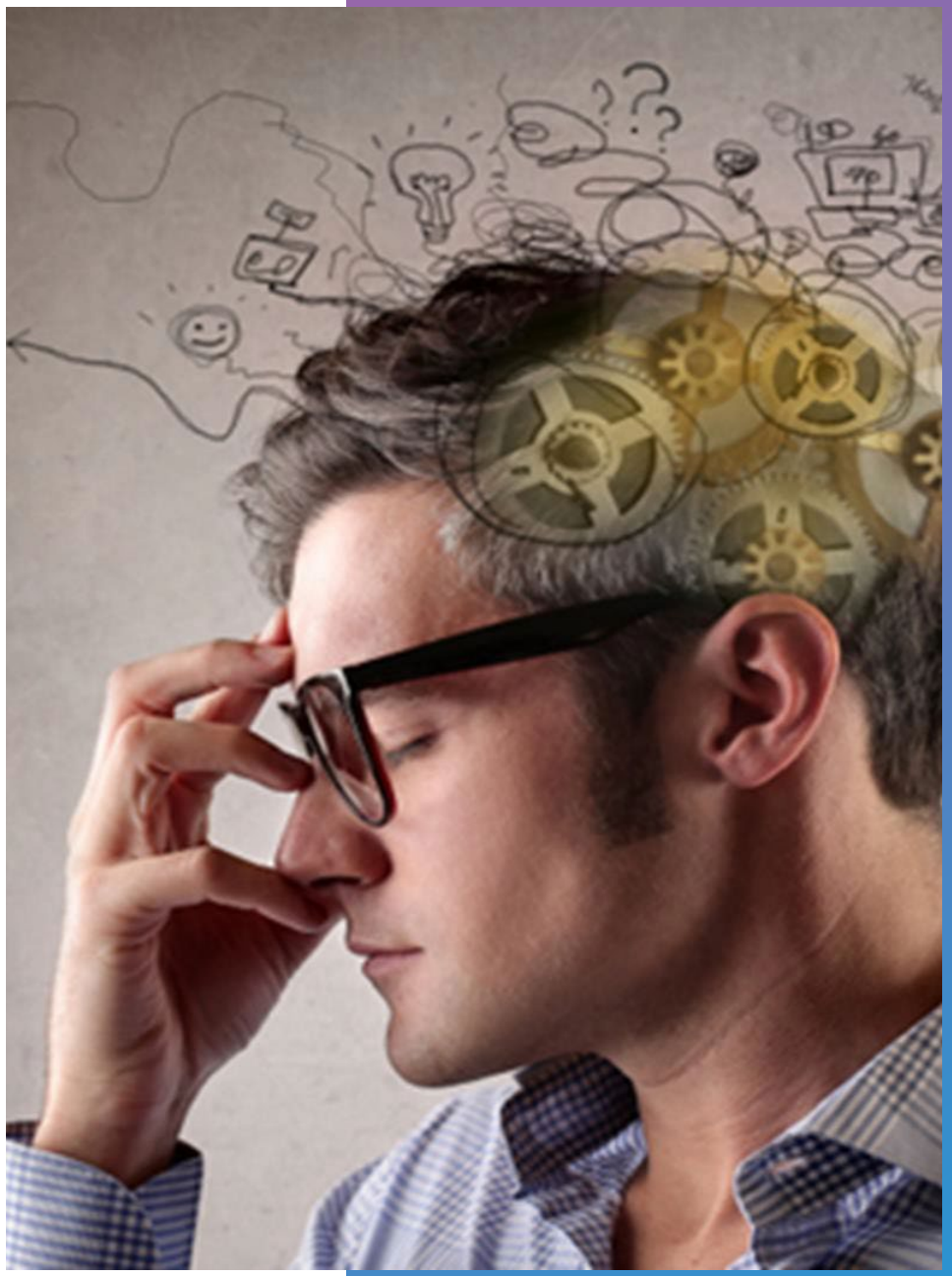
Viktor Frankl

PCSS Medications for Opioid Use Disorders | Providers Clinical Support System

Decision-Making Framework

- **Pause and ask**: Who benefits? Is it tied to goals? Would I document this comfortably? Would I consult a supervisor? Ethical disclosure is deliberate, not spontaneous."

- **Intent** – Who is this for? Why am I wanting to share this?
- **Relevance** – Does it serve treatment goals?
- **Timing** – Is now appropriate?
- **Client Factors** – Diagnosis, trauma history, culture.
- **Impact** – Short- and long-term effects.
- **Consultation** – Supervision or peer input.



PCSS Medications for Opioid Use Disorders
Providers Clinical Support System

Substance Use Treatment Considerations

While thoughtful disclosure of lived experience can reduce stigma and build trust, ethical practice requires careful attention to boundaries, power dynamics, and potential risks of over-identification or role confusion.

- Disclosure of recovery status.
- Peer vs. clinician roles.
- Power dynamics and credibility.
- Risks of over-identification.
- Agency policies and licensing guidance.



PCSS Medications for Opioid Use Disorders | Providers Clinical Support System

Mental Health & Trauma Considerations

- Clients with attachment or trauma histories may interpret disclosure differently. What feels connecting to one client may feel unsafe to another.

  - Trauma-informed lens.
  - Client attachment styles.
  - Emotional regulation capacity.
  - Risk of triggering or re-traumatization.



PCSS Medications for Opioid Use Disorders | Providers Clinical Support System

Key Take Aways

- Ethical self-disclosure is brief, relevant, and client-centered. Consultation and reflection are protective factors. The goal is always therapeutic benefit - **not** clinician comfort.
  - Intentional, client-centered, minimal.
  - Use consultation and documentation.
  - Align with ethical codes and agency policy.
  - Continue professional development.
- Intent belongs to us – Impact will belong to the other person and is why we need to be so thoughtful and purposeful.
- Ongoing reflection, supervision, and ethical frameworks are critical to safe practice.



PCSS Medications for Opioid Use Disorders
Providers Clinical Support System

References

1. American Counseling Association (ACA) Code of Ethics.

2. American Psychological Association (APA) Ethical Principles of Psychologists.

3. Ben-Dor, I. A., Kraus, E., Goldfarb, Y., Grayzman, A., Puschner, B., & Moran, G. S. (2024). *Perspectives and experiences of stakeholders on self-disclosure of peers in mental health services*. **Community Mental Health Journal, 60**(7), 1308–1321.

4. Robertson, A. M., Cruwys, T., Stevens, M., & Platow, M. J. (2025). *Leading by example: Experimental evidence that therapist lived experience disclosures can model the path to recovery for clients*. **British Journal of Psychology, 116**(2), 409–431.

5. Rachwal, F., & Gredecki, N. (2024). *A phenomenological investigation into the use of therapist self-disclosure in compassion-focused therapy with forensic clients*. **International Journal of Offender Therapy and Comparative Criminology, 70**(1), 38–54.

6. Shapira, N., & Alfi-Yogev, T. (2024). *Therapist self-disclosure as a natural language processing task*. In A. Yates et al. (Eds.), **Proceedings of the 9th Workshop on Computational Linguistics and Clinical Psychology (CLPsych 2024)** (pp. 61–73). Association for Computational Linguistics.

7. Corrigan, P. W., Spicknall, V., Talluri, S. S., Manthey, J., & Schomerus, G. (2025). Decreasing the self-stigma of substance use disorder through disclosure and recovery narratives. Stigma and Health.

PCSS Medications for Opioid Use Disorders
Providers Clinical Support System

PCSS-MOUD Steering Committee

- PCSS-MOUD is led by the American Academy of Addiction Psychiatry (AAAP), in collaboration with a coalition of national professional and healthcare organizations.

Learn more about the Steering Committee and its partner organizations:
https://pcssnow.org/about/steering-committee/



PCSS Medications for Opioid Use Disorders
Providers Clinical Support System

PCSS-MOUD Mentoring Program

- Designed to offer general information to clinicians about evidence-based clinical practices in prescribing medications for opioid use disorder (MOUD).
- Supported by a national network of providers with expertise in addictions, pain, and evidence-based treatment, including MOUD.
- Three mentoring options are available to meet your needs.
- No cost to participate.



For more information visit:
https://pcssNOW.org/mentoring/

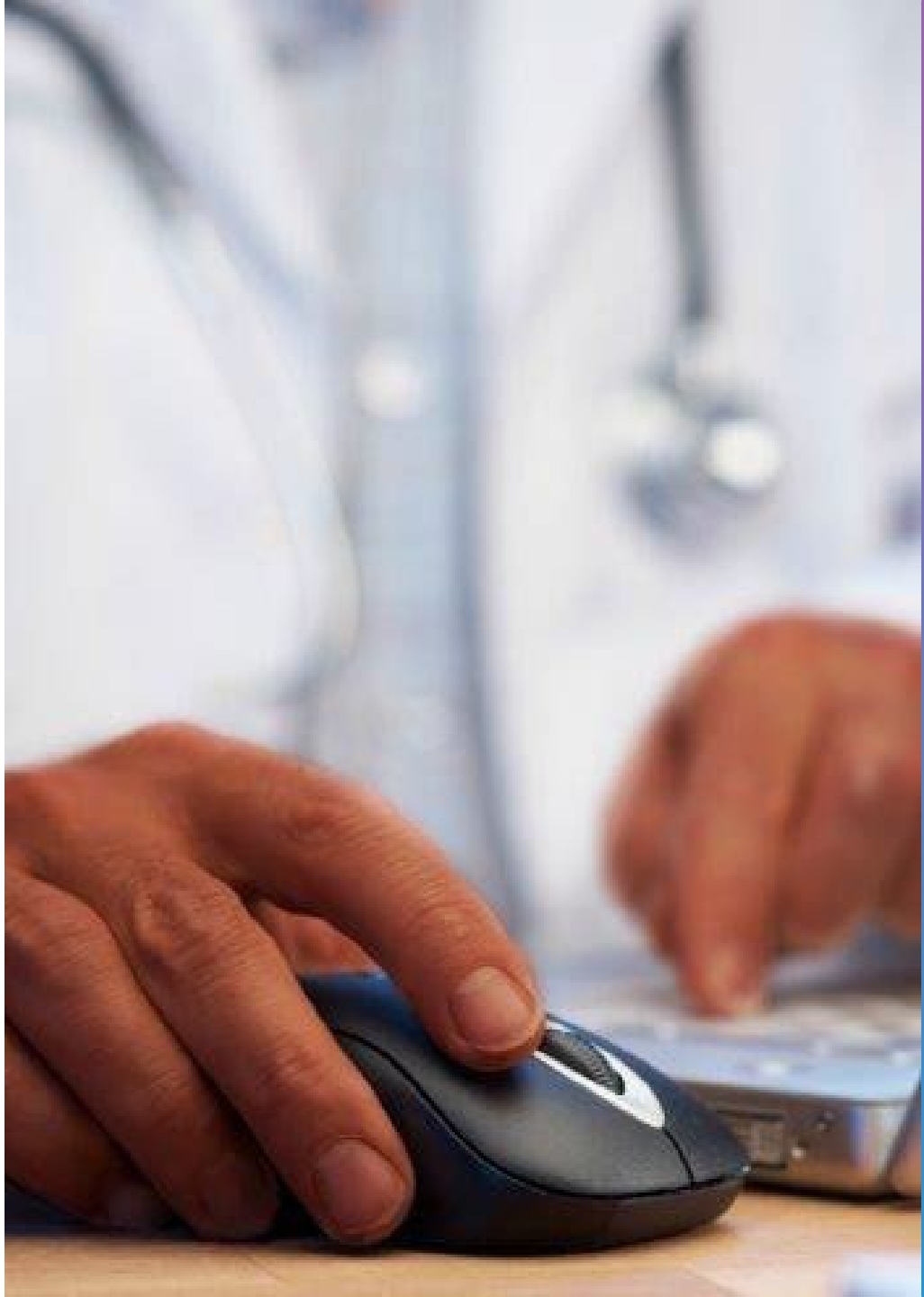
PCSS Medications for Opioid Use Disorders
Providers Clinical Support System

1: Discussion Forum

- An online discussion forum moderated by addiction specialists where health professionals can post questions and receive answers from clinical experts and other colleagues.

Register here at no cost!

For more information visit:
https://pcssNOW.org/mentoring/



PCSS Medications for Opioid Use Disorders
Providers Clinical Support System

2: Ask a Clinical Question

- A simple and direct way to receive an answer related to Substance Use Disorder, Opioid Use Disorder, and other related topics. Designed to provide a prompt response to clinical questions via email.

Submit your clinical question

For more information visit:
https://pcssNOW.org/mentoring/



PCSS Medications for Opioid Use Disorders
Providers Clinical Support System

3: One-on-One Mentoring

- Provides individualized, one-on-one guidance via email, phone, or in-person (if feasible), to discuss specific clinical issues. Members are “matched up” with one of our mentors in their region. This is the most in-depth of the three PCSS-MOUD mentoring tools. Please contact **pcssmentoring@aaap.org** to receive a mentor request form.

Browse our Mentors

For more information visit:
https://pcssNOW.org/mentoring/



PCSS Medications for Opioid Use Disorders
Providers Clinical Support System

Contact us

PCSS-MOUD: Educate, Train, Mentor

PCSS-MOUD | Facebook

PCSS-MOUD.org

pcss@aaap.org



Funding for this initiative was made possible by cooperative agreement no. 1H79TI086770 from SAMHSA. The views expressed in written conference materials or publications and by speakers and moderators do not necessarily reflect the official policies of the Department of Health and Human Services; nor does mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government.