# Social Work Self-Disclosure: A Supervision Tool to Assist Early Career Social Workers

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## Abstract

The concept of self-disclosure has been a controversial issue that remains highly debated by current practising social workers and researchers alike. Yet an increasing number of lived experience practitioners or peer support workers are being employed in many human services areas, including mental health, suicide prevention, bereavement services, drug and alcohol recovery, criminal justice, and emergency services, alongside or in complement to, social worker roles. Peer or lived experience roles seek to enhance the recovery journey for clients by sharing lived experience commonality, whereas social workers seek to enhance the recovery journey through psychosocial engagements. Both may have relevant lived experience to their role. The aim of this paper is to explore how sharing lived experiences, also referred to as self-disclosure, between social workers and client/service user can enhance the relationship, with attention paid to safety and recovery. A narrative review of the literature identified that there is a lack of empirical research undertaken exploring how disclosures impact the service users and what decision-making strategies can assist social workers in deciding how and when to share. The current AASW *Code of Ethics* offers no clear practice standards or ethical guidelines for effective self-disclosure. The analysis of the literature results in a reflective supervision tool for social workers in pre-service training and early career social workers, with the aim of assisting decisions that may prompt lived experience sharing. Recommendations for further research and development are included.

**Keywords:** *Social work; Self-disclosure; Lived-experience; Peer work; Supervision*

## Introduction

Raines (1996) purported a one-truth or one-technique strategy to clinical social work that discourages sharing of similar lived experience rather than facilitating clinical judgement in deciding what is and is not appropriate to share. There is scant research on the sharing of lived experience in social work settings, with reflections primarily focusing on the negative aspects of sharing lived experience with service users (Audet & Everall, 2010; Marino et al., 2016). Social work practice (noting that not all social workers engage in clinical settings) can offer key opportunities to advance the understandings of lived experience inclusion. We understand that one of components associated with sharing centres on positionality of power, therapeutic boundaries (Fox & Wayland, 2020), counter-transference and role reversal which sometimes leaves clients feeling overwhelmed and misunderstood (Myers, 2020). Yet little research has been able to capture a client perspective of how the sharing of a social workers lived experience can enhance the support relationship, and whether it is possible to remain neutral when engaged in rich reflective discussions (Maroda, 1999).

Many social work and human service professionals enter the profession with lived experiences often informed by trauma-related life-changing events (Morgan & Lawson, 2015; Cvetovac & Adame, 2017; McInerney & Wayland, 2022). These experiences form a part of the social worker's knowledge base and can create shared understanding when clients or service users are experiencing similar life journeys.

Unlike peer support worker training (Wayland et al., 2020) Social workers and other human services fields of practice do not gain training in effective skills and ethical practice methods of using self-disclosure within professional practice with clients (Ding et al., 2020). Instead, most undergraduate, and postgraduate social work curricula discourage sharing details of personal experience. Yet personal lived experience of social workers in addition to tertiary level skills training may benefit the profession. The nuance between self-disclosure as distinct from lived experience refers to the action of sharing information relating to personal events, illness, or experience as a way of engaging with the support needs of an individual. The position of having (or working) as a lived experience practitioner or peer worker refers to the identify of having the experience, but not disclosing the details of that experience unless promoted or choosing to (Byrne et al., 2022). Meaning that social workers may have lived experience of the sector they are placed within or work within, yet disclosures as to the sharing of that lived experience are poorly understood.

The Australian Association of Social Workers *Code of Ethics* (2020) and Practice Standards (2023) do not address the role of disclosures, lived experience, or facilitated sharing of historical experiences in the practice setting. Cultural inclusion of lived experience is noted (section 1.3) within the *Code of Ethics* identifying that "valuing the knowledge and lived experiences of Aboriginal and Torres Strait Islander social workers" is paramount; however, peer work, lived experience or safe use of disclosure are not yet addressed.

The conceptualisation of the project was prompted by the positionality of the first author's use of lived experience reflections in professional practice. Their exploration of how decisions (as to when and why they might share lived experience) shaped an interest in the need for professional guidance from final social work placement to new graduate social work career paths.

Lived experience can be defined as "achievement, values and skills" gained within the duration of one's life and draws on experiences of trauma (Morgan & Lawson, 2015, p. 80). When a professional reveals or makes statements about personal details within their life experiences, this is termed *self-disclosure* (Ding et al., 2020; Norcross, 2002). Given the dearth of literature specifically in the social work field, a broader analysis of the literature in therapeutic alliance was explored in addition to the role of peer workers given the natural inclusion of disclosure within those roles.

Self-disclosure has been defined within this paper as statements that reveal a personal story (Ding et al., 2020; Knox & Hill, 2003). Morgan and Lawson (2015), in developing guidelines for self-disclosure, identified that "disclosure" had negative connotations with the term "sharing" as an alternative. Whilst we recognise that not all social workers are employed to deliver therapeutic interventions or treatments, the notions of "therapeutic alliance" or "therapeutic relationship" are considered in the context of the shared relationship of the social work student or professional and the service user.

Freud (1912) believed that a therapist should remain "opaque" from their client and show no aspect of their self in therapy to allow the client to openly express themselves in a therapeutic relationship (Knox & Hill, 2003; Sherby, 2013). This aligns with the theoretical underpinning of psychoanalytical interventions (Ding et al., 2020). However, when we consider the works of Rodgers (1957), who identified the notion of self-disclosure (either verbal or non-verbal) in accordance to being congruent in therapeutic relationship and believed that therapy should be a real "person-to-person experience" (Rodgers cited in Muran, 2010, p. 191). Self-disclosure in clinical and non-clinical settings aligns more with person-centred and humanistic approaches to intervention, whereby modelling and normalising clients' feelings often occurs and is shown to enhance the development of therapeutic alliance (Ding et al., 2020; Knox & Hill, 2003). This sharing of information may be used by social workers to build rapport and reduce client isolation, by validating experiences and in some instances, increasing clients' or service users' hope for recovery (Lawson et al., 2021). This development of the social worker–service user relationship has the ability to increase by the sharing of information personal information at a number of levels. Knox and Hill (2003) identified two types of self-disclosures, the first referring to the sharing of social workers' thoughts and feelings in reaction to the content of the service user's session. The second refers to the sharing of details stemming from the direct life experiences of the social workers (Knight, 2012). In this instance, relating to services users may occur by sharing small details such as the shared commonality of parenthood for services users accessing family or childhood services – to more in-depth sharing of information by the social worker that identifies commonalities of the experiences relating to drug and alcohol or mental health recovery journeys, grief and loss, out-of-home care childhood experiences or victims of sexual or domestic and family violence.

Alongside these reflections is the emergence of the peer support work, or lived experience workforce, signify the "natural tendency for people with something in common to come together to share experiences and support each other" (Walsh et al., 2018, p. 580). Peer support workers use lived experience and often include details of their own recovery journey from substance use, mental illness or grief and loss to support and encourage empowerment and resilience in their clients. They do this in conjunction with evidence-based interventions such as motivational interviewing, cognitive behavioural therapy, and wellness recovery planning (Gagne et al., 2018). The ability to support these interventions with firsthand knowledge of the experiences is what ultimately differentiates a peer worker from a clinical social worker (Gagne et al., 2018). What is key to understanding here is if we acknowledge social workers often come to the profession with lived experience, what constitutes the role and function of the boundaries required to facilitate self-disclosure, if appropriate?

Social workers all have lived experience of a spectrum of adverse life events alongside formal training in intervention skills. Fox and Wayland (2020) articulated the very essence of this argument when they stated that "social work is a profession about life and to negate our own lived experience is to negate our ways of knowing and being" (p. 35).

## Method

To allow the authors to conceptualise an informed approach to the research question, a narrative review (Aveyard, 2018) was undertaken to identify strategies in the literature to understand the decisions required for disclosures. Social workers themselves are not immune from experiencing difficulties of life events and psychological impacts that are characteristic within human life (Cvetovac & Adame, 2017). These challenges often influence social workers decisions to enter human services fields (Cvetovac & Adame, 2017; Morgan & Lawson, 2015).

The review of the peer-reviewed research identified that people often look for similarities in others when interacting and the history of one's lived experiences can influence the qualities sought after to make a meaningful connection (Immanuel et al., 2019). Trust and empathetic understanding are both key elements to creating strong and effective social worker–service user relationships (Immanuel et al., 2019). In addition, cohesion, alliance, collaboration with positive regard, congruence, feedback, self-disclosure are also identified as promising components (Norcross, 2002).

Hill and O'Brien (1999) recommended a subdivision of self-disclosure categories, broken down as: disclosure of facts, disclosure of feelings, disclosure of insight, and disclosure of strategies (Norcross, 2002, p. 255). These varying types of disclosure are used to achieve different impacts during engagements (Knox & Hill, 2003) and it has been identified that self-disclosure that occurs either too often or too infrequently loses the beneficial impact (Myers, 2020). Myers (2020) found that identify timing, nature, quality of the supportive relationship and the detail of self-disclosure, as other factors that influence effectivity (p. 115). Morgan and Lawson (2015) believed that "sharing lived experience has the potential to bridge the gap between theory and practice in delivering a values-based service" (p. 79).

Table 1 illustrates a summary of key elements identified as beneficial or negating factors of social worker self-disclosure located in the literature.

**Table 1**

*Summary of Key Elements*

| Benefits or reasons to share | Negatives or reasons not to share |
| --- | --- |
| Increase perceived similarity | Satisfy own needs |
| Model behaviour | Shift focus from client to social work |
| Enhance therapeutic relationship | Shift flow of client conversation |
| Validate or normalise experiences | Confuse or overburden client |
| Offer alternative ways of thinking | Intrusive for client |
| Satisfy client desire for information | Confuse boundaries in therapeutic relationship |
| Increased client insight | Vulnerability of social work |
| Social work appears more "real and human" | |
| Clients' increased reassurance and normalisation | |
| Models open and honest communication | |

*Note:* Comparison of positive and negative reasons to share lived experience with clients

### Wounded healers

Increasing research into "wounded healers" is beginning to identify the concept of woundedness in therapists as normal, one that often gives a perceptive connection into their clients' struggles (Cvetovac & Adame, 2017). Wounded healers are identified as persons who have experienced "personal suffering and recovery", hence gaining invaluable insight into the healing process (Cvetovac & Adame, 2017, p. 349).

McDonald and Grau's (2019) work identified that the personal growth, resilience, recovery, and healing gained from personal experiences of trauma and grief enhances the ability for practitioners to integrate this experience into therapeutic healing with clients (McDonald & Grau, 2019). Yet it also poses potential difficulties in re-traumatisation, counter-transference, and personal distress for the social worker. In this light it could be asserted that some wounded healers may have potential for professional incompetence should they be unable to recognise when personal issues interfere with professional service.

Jung (1954) proposed that a "therapist's capacity to heal others is directly related to his or her own experiences of wounding and healing", however social workers must be insightful of these wounds so as not to allow them to interfere with the benefits of practice (Cvetovac & Adame, 2017, p. 349). There are no clear guidelines around when a social worker or peer worker has healed 'enough' from their experiences to provide effective and ethical service to their clients (McDonald & Grau, 2019).

### Acknowledging the peer support workforce as a pathway to social work practice

The American Substance Abuse and Mental Health Services Administration (SAMHSA), specifically lists the core competencies for peer works in behavioural health services (SAMHSA, 2015). The principles include recovery-orientated, person-centred, relationship-focused, voluntary and trauma-informed practice models. These align with humanistic approaches in therapy where it has been identified that therapist self-disclosure is more likely to occur than psychoanalytic approaches (Myers, 2020).

Peer support workers and their pathways to being wounded healers are characterised by the journeys they seek to actively engage and connect with clients with an intention to support recovery. Peer work has demonstrated effectivity and as such has seen an increase of employed peer work roles into many behaviour health services (Gagne et al., 2018). This focus on reflection and recovery, as well as engagement with core competencies, aligns with the core values and ethics of social work practice. The review of the literature identifies the significant gap for social workers in training for effective application for disclosure in client–service user engagements.

### Development of a reflection tool

Lewis and King (2019) noted that, in teaching self-care in social work field placements, critical self-reflection activities are required; however, strategies to identify the nuance of self-disclosure in certain social work settings (such as peer workers, or in roles where lived experience is common – like grief, bereavement, and mental health) were absent. What is understood currently from the literature (Davidson, 2011) is the role of supervisor self-disclosure and how this impacts the working alliance in field placement, noting that disclosure may increase a sense of trust, model expectations of how self-disclosure 'works' in a placement and how mentoring can be enhanced by the sharing of person experiences. There is a growing evidence base to support such sharing that has not yet been extended to social worker disclosure outside of the supervisory setting.

The need to understand whether professionals with lived experience of varying life events or issues can create a deeper connection and express more accurate feelings of understanding with clients was the premise of development of a reflective tool, to be utilised in supervision – first between social work supervisors and students on field placement, and then taken with students to utilise in their social work careers in their early careers and beyond.

What was uncovered in the narrative review of the literature, to inform and guide social workers with suitable skills required for effective self-disclosure (or deliberate sharing lived experiences) led to development of the tool titled 'Decision tree' (see Figure 1). This was designed as a guidance tool to assist social workers consider key factors that impact on the effective delivery of their lived experience informed by the literature located.

The development of the tool was enhanced by the methodological insights of Hill and Knox (2001), Morgan and Lawson (2015), and Marino et al. (2016) to explore what inclusions were required within the decision tree tool. These included factors around *reasons* for disclosure, what information to disclose, the *power* of disclosure and identifying *possible harm* or negative responses to sharing. These quadrants were shaped by the Australian Association of Social Work's *Code of Ethics* (2020) that identify safety for the client, alongside safety for the professional.

When developing the reflective questions, the following statements formed the basis for creating the decision nodes as co-constructed by the authors, their lived and learnt experience and the review of the current evidence base:

1. Social worker disclosure should occur infrequently.

2. Social worker disclosures require boundaries such as sexual practices and beliefs.

3. Disclosures should generally be intended to validate reality, normalise, model, strengthen the alliance or offer alternative ways to think or act.

4. Disclosure for the social workers' own personal needs should be avoided, as should that which confuses the boundaries, flow of session, overburden or intrusive to the client.

5. Disclosure in response to similar client disclosure may enhance future client disclosure.

6. Client reactions to social worker disclosure should be carefully observed and used to determine the intervention pathway.

7. Social worker self-disclosure may assist to elicit information from clients with difficulties engaging within a supportive setting.

8. Social workers should use professional supervision to reflect on self-disclosure experiences to assist in determining the effectiveness or areas for improvement (Hill & Knox, 2001).

**Figure 1**

*Self-disclosure Decision Tree and Reflective Tool*



**SHOULD I SHARE MY PERSONAL LIVED-EXPERIENCE WITH MY CLIENT?**

A DECISION TREE AND REFLECTIVE TOOL
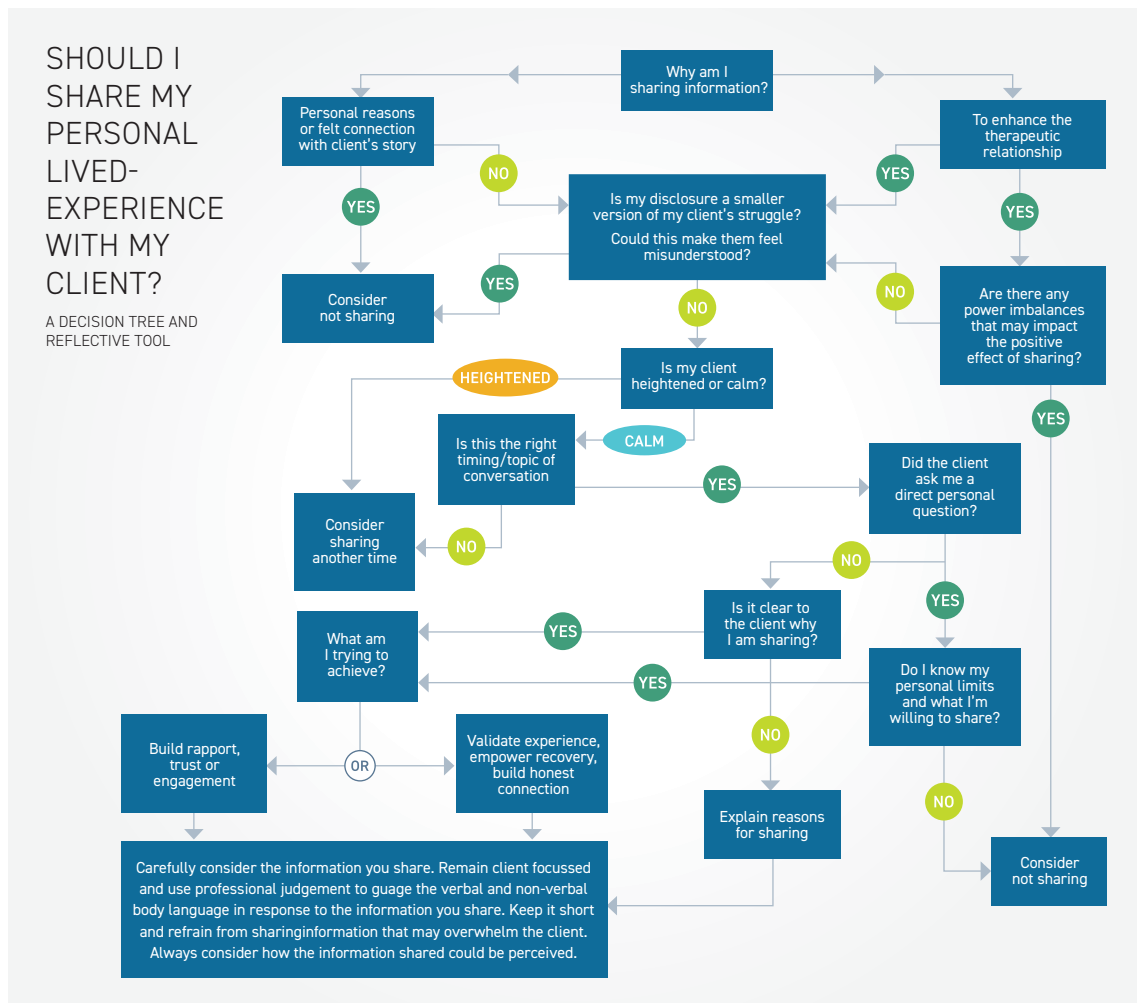
*Note:* Tool developed when considering using self-disclosure a part of therapeutic interventions or for reflection within formal supervision.

## Discussion

Undertaking a narrative literature review and development of an associated supervision tool has highlighted the extent of gaps in the current research that measure the impacts of social workers sharing lived experiences. Confirming that there is evidence that suggests self-disclosure by social workers can have several benefits in the supportive relationship. Namely building trust and rapport making the social worker appear relatable, thereby facilitating a stronger therapeutic alliance (Szczygiel, 2021). The role of self-disclosure or sharing lived experience can convey empathy and understanding as an action validating a person's experiences. For some, the sharing or disclosing can act as a breaking of a 'therapeutic impasse', allowing social workers to provide clients with new perspectives or insights to move the therapeutic process forward (Szczygiel, 2021).

Finally, in the supervisory context, self-disclosure can enhance the learning experience of supervisees. We know that supervisors who share their own experiences and struggles can foster a stronger supervisory alliance and provide valuable learning opportunities for supervisees (Segev & Hochman, 2022). However, it is important to note that self-disclosure should be used judiciously and ethically, with careful consideration of the potential impacts on the client and the social workers relationship with them (Davidson, 2011).

What is also important to understand with the emergence of peer worker roles that social workers engage with is the difference between self-disclosure by social workers versus self-disclosure by peer workers. Peer workers have a greater equalisation of power within the therapeutic relationship in addition to skills training within formal education (MacLellan et al., 2015). Peer workers acquire direct skills in using their lived experience to appropriately empower, guide and model behaviours associated with successful recovery and resilience (MacLellan et al., 2015: Puschner et al., 2019).

With the effectiveness of peer support work increasingly recognised, further research into any power balance differences would assist to understand whether similar skills training could be considered within tertiary education for social work and other human service professions (Drinkwater et al., 2020). In addition to this, research and development may assist in teaching effective self-disclosure skills within undergraduate and postgraduate curricula. Further research could establish clearer guidelines that inform production of training manuals for use in guiding the development of practice skills that extend the conversations relating to safe disclosures.

We are also yet to understand from the research how different cultural backgrounds respond to the experience of self-disclosure. Differing cultural values may result in service users responding differently to self-disclosures around subjects such as mental health (Marino et al., 2016). It is also important to note that social workers with diverse cultural backgrounds may choose to work in service areas that support services users from the same cultural background. In this way, social workers may assimilate with cultural barriers faced by the service users and therefore encounter situations whereby some form of self-disclosure is offered to assist in the social worker–service user relationship. Social workers working within cultural communities, or in smaller rural communities, are more likely to have situations whereby their personal identities are known to service users prior to service interaction and whereby conflicts of interest can be identified (AASW, 2020). These should be recognised early and disclosed as part of ensuring adherence to the AASW *Code of Ethics* 2020, section 5.7.11; however these also provide opportunity to utilise the tool to discuss any conflicts of interest within supervision. Whilst the tool itself seeks to enhance and clarify key considerations for self-disclosure, it is unlikely to be directly consulted during a support session. Alternatively, the decision tree and its knowledge base does provide a clear pathway to familiarise with the key considerations and the potential use of ethical self-disclosure within sessions. It is with this familiarisation in mind that we identify the prospective use of the decision tree within supervision.

Supervision is a core component of professional practice that provides the opportunity for, not only professional development, but for the development and identity of "self" through learning and critical thinking discussion (Rankine, 2017). Participating in supervision upholds social work practice standards, whereby social workers of all experience levels discuss ethical dilemmas, critically analyse, and reflect therapeutic methods, and disclose and express personal emotional impacts of professional work (AASW, 2014).

'Use of self' is a key value within social work practice and this connection to our personal values and learning from our lived experiences is emphasised through social work course work and field education. As previously highlighted however, the practice skills to use lived experiences to inform and disclose during work are not commonly taught. This leaves a gap for new social work graduates entering the field to feel confident in using knowledge and their lived experiences within practice.

Solo (2019) in supervising social work students who are developmentally within the emerging adulthood stage of 18-29 years old identified this stage to be forming and developing their identity. Graduates entering the profession within this developmental stage are still developing their identity, 'use of self' and connection to their personal values and ethics (Solo, 2019). This highlights the importance of supervision within these formative years in the profession, to provide support and guidance for emerging adults in the field of social work.

Regardless of the developmental age of graduates, however, development of professional identity and the formation of values is key within these first few years that social workers transition from student to graduate professional (Harrison & Healy (2016) Supervision methods that enhance the development or connections to 'self' for graduates add value to the learning professional whilst providing induction and support that can safeguard burnout and fatigue (Hunt et al., 2017). Skills in self-disclosure practices within tertiary education would then ensure social workers have an appropriate skill level to apply within professional practice. It would be beneficial to ensure that lived experience practitioners are supported appropriately within the workplace and, through reflective supervision, maintain awareness of negative impacts that may impact professional practice.

Reflective methods used within supervision provide learning opportunities for both social workers and supervisors, whilst offering a framework to analyse therapeutic events (Rankine, 2017). Reflective models may offer cyclical, phased or listed methods of reflection to identify with thought processes, feelings and theoretical knowledge that present and contribute to how the intervention unfolds during professional practice (Ingram et al. 2014). The process of discussing thoughts and feelings associated with the decision-making processes and actions of events, allows professionals to enhance and transform their practice by connecting knowledge theory and skills (Chenoweth, 2021).

The social worker self-disclosure decision tree offers a framework for reflection on incidences that occur within client intervention. Within supervision, the tool can assist both the supervisor and social worker to identify factors that may have been present within the intervention at the time of social workers' self-disclosure. The decision nodes were developed with consideration to points in the intervention where conversation pathways or client interpretations may alter the desired effect of the self-disclosure. Supervisors may use these nodes to lead a framework of reflective questioning that assists the social worker to identify knowledge, theory and emotional impacts evident at the time.

### Utilising caution when engaging with the reflection tool

Social workers may face barriers when engaging in self-disclosure when utilising the decision-making tree during supervision. One of the main challenges is determining when and how to self-disclose in the context of everyday social work practice (Knight, 2012). This decision-making process can be complex and nuanced, requiring a careful consideration of the potential impacts on the client and the student social worker or social worker (Knight 2012)

Another challenge is managing the boundaries between the personal and the professional. Social workers need to navigate the link between their personal thoughts, feelings, and experiences, and their professional roles (Davidson, 2011). This can be particularly challenging in situations where self-disclosure could blur the boundaries between the social worker and the client, potentially leading to issues such as transference and counter-transference (Davidson, 2011).

The diverse settings of social work practice also pose challenges for self-disclosure. The appropriateness and effectiveness of self-disclosure can vary depending on factors such as the theoretical orientation guiding practitioners in their intervention, the therapists' experience, and the specific context of the worker–client encounter (Segev & Hochman, 2022).

Education and supervision can play a crucial role in addressing these challenges. In the classroom setting, self-disclosure can be used as a tool for learning and professional growth (Knight 2012). Through careful attention to students' self-disclosures, academic teaching staff can facilitate discussions about everyday practice quandaries relating to self-disclosure, helping students to develop the skills and insight necessary to navigate these issues in their own practice (Knight, 2012).

Supervision can also provide a supportive space for social workers to reflect on their use of self-disclosure, explore their motivations, and consider the potential effects on their relationships with clients (Szczygiel, 2021). Through reflective supervision, social workers can gain a deeper understanding of the complexities of self-disclosure and develop strategies for managing the associated challenges and risks (Szczygiel, 2021).

Furthermore, teaching self-disclosure can contribute to the development of students' professional identity, helping them to understand how to use their selves professionally and cultivate self-reflection and self-awareness (Davidson, 2011). This can equip them with the skills and knowledge to manage the challenges of self-disclosure in their practice.

Reviewing these key points within supervision, social workers can learn from these events and continue to develop enhanced skills in using self-disclosure within future service users. Alternatively, where self-disclosure did not generate the desired effect or the response from the client was negative, this also produces an opportunity to reflect and learn with the guidance of the supervisor. Alternative skills, methods and decision pathways may be discussed and suggested, along with learning opportunities for ethical use of self-disclosure that prevents any harm to the client. This is particularly important in the support and induction of newly graduated social workers due to the high probability that graduates may lack skill acquisition and opportunities for gained experiences in using self-disclosure.

It is important for social work students to understand and adhere to the standards in line with the AASW *Code of Ethics* (2020). As we have identified, the crossing of professional boundaries is a potential risk to the use of self-disclosure within social practice. Section 5.7.6 of the Code specifically relates to the use of self-disclosure and its use being to only benefit the service user (AASW, 2020). It states that, "If unsure, social workers will seek professional consultation or supervision to review their intention to use self-disclosure" (AASW, 2020, p. 21). Supervision is one way that social students can use reflective methods to understand positions of maintaining their professional boundaries both as student on placements and moving forward into professional practice.

The tool has potential for use within group supervision and in application to case study examples for professional development training. In addition, individual social workers may consult the decision pathways with consideration for self-disclosure use or reflecting upon it in retrospect. As with many aspects of applying social work theory and models of intervention with clients, none of these gives social workers a definitive answer or directive process to a client's situation. Instead, they provide a guide, map or understanding of the concepts and the workings of society (Payne, 2014). There are many 'grey' areas, and every client and situation should be carefully considered, with the most appropriate action applied at the time. Therefore, it can also be identified that this tool is not a definitive pathway to self-disclosure application either. Yet, coupled with gained professional knowledge, skills, an informed theory base, and professional judgement, social workers may find the mapped concepts useful in the application of self-disclosure that will enhance the client relationship and intervention.

## Conclusion

Social workers with lived experience have much to offer the people they support alongside their life journeys. Social workers' self-disclosure aims to enhance a humanistic relationship with individuals, whilst normalising and showing deep understanding for a person's circumstances. However, there are no clear guidelines or direct practice skills taught within social work coursework to enable social worker students gain enough knowledge to share their personal information effectively and ethically. Further research from a client's perspective as to the impacts of self-disclosure has (or had) on their therapy journey is required to assist development and wider acceptance of the concept. Perhaps with increased knowledge and evidence-based research, consideration for skills training may assimilate fellow peer workers. Ultimately, increased knowledge and skills would provide greater opportunities to confidently use their lived experiences to enhance their relationships and supportive interventions.

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