Psychiatry in the Age of Facebook: Implications and Pitfalls of Cyber-Communications

Group for the Advancement of Psychiatry Fellows’ Plenary Session
White Plains, New York
Friday November 12, 2010
Objectives

- To introduce the various modes of electronic communication and online social networking
- To discuss implications of social media on
  - Society
  - Patients
  - Psychiatry
- To review existing guidelines and present a framework for more comprehensive guidelines
- To present results of our survey of the GAP membership
Psychiatry in the Age of Facebook:

Survey of the GAP Membership
GAP Survey

- To study patterns of electronic communication and social networking use among GAP members
- The survey was designed by reviewing and modifying available survey instruments
- Study approved by IRB, Tufts Medical Center
- Survey mailed out to GAP members February 2010
- Survey collected at April 2010 GAP meeting
Demographics

- 178/262 (68%) members responded
- Mean Age: 58.3 ± 14
- Practice Patterns: 56% academic; 41% private
- Effort: 73% FT; 27% P/T
Psychiatry in the Age of Facebook:

Introduction to Social Media
Social Networking – What is it?

The Ultimate Source of Knowledge

SOUTH PARK
Abe Lincoln is headed for the theater.

Abe is freeing the slaves.

Reconstruction: You helped defeat the South, now be a part of it

Fondly do we hope — fervently do we pray — that this mighty scourge of war may speedily pass away.

Abe is now friends with Jefferson Davis.

Abe is listed as in a relationship and it’s complicated.

Joshua Speed uploaded a new video.

I got a crush on Honest Abe.

Horace Greeley tagged Abe in a photo.

Abe is depressed and having a hard time getting out of bed today.
There is a review article on the use of acetylcholinesterase inhibitors for visual hallucinations in schizophrenia by Sachin Patel and colleagues and which is freely available here. This is a very short BMC Psychiatry paper. The authors justify their choice of topic thus:
Group for the Advancement of Psychiatry

The Group for the Advancement of Psychiatry (GAP) is an American professional organization of psychiatrists dedicated to shaping psychiatric thinking, public programs and clinical practice in mental health. Its 29 committees meet semi-annually and choose their own topics for exploration. They explore issues and ideas on the frontiers of psychiatry and in applying psychiatric insights into general medical, social, and interpersonal problems.

History of GAP

GAP was part of a larger move toward professionalization of the field. GAP was founded in May 1946 by a group of young psychiatrists who had served in World War II. They returned to the U.S. to find an inadequate system of civilian care and were impatient with the traditionalism of the American Psychiatric Association (which had originally been founded as an association of asylum superintendents). GAP was formed under the leadership of Dr. William C. Menninger[3] and the “young turks” in American psychiatry who were eager to professionalize the field. Menninger wrote:

The organization of GAP was not a revolution. With the deepest sincerity, the founding group was seeking a way in which American psychiatry could give more forceful leadership, both medically and socially. Although the name may sound presumptuous, it was chosen because of the sense of great urgency that psychiatry should advance, and the belief that by hard work, and teamwork, we could help it do so. Those early years of GAP were marked by the feeling on the part of its membership that much needed to be done, and quickly.

Publications

GAP's first published report (by the Committee on Therapy) was on the "promiscuous and indiscriminate use of electro-shock therapy." GAP’s formulated policy to discuss controversial psychosocial issues was announced in 1950 in the Committee on Social Issues’ Report. The Social Responsibility of Psychiatry. A Statement of Orientation[6] in that
South Park Why Facebook Sucks

Funny south park episode clip on facebook! Enjoy!

Highest Rated Comments

beep43
3 weeks ago 61
I found out that my now ex-wife was cheating on me by looking at her facebook page.........dude fuck facebook seriously!:) Narcissistic bullshit that brings out the worst in attention starved self centered assholes living in a fantasy world.

DJokerr
Facebook is for losers!
Top Tweets  View all >

**FactsAboutBoys**  Guys hate the words "stop" and "please don't" unless they were used in the same sentence, "please don't stop.  
#factsaboutboys

2 hours ago

**TheDailyLove**  A BREAK-UP is an opportunity to TRADE-UP! Replace the good with the OUTSTANDING!  
#TDLinNYC

2 hours ago

**aliciakeys**  Read this amazing quote today! "Don't Tell me Sky is the limit when there are footprints on the moon" MEAN QUOTE!!! GO get your dreams!! ;-)  

2 hours ago
Facebook

“A social utility that helps people communicate more efficiently with their friends, family and coworkers” – Facebook.com

Basic format includes Home Page and Profile, with “News Feed” of updates of one’s “friends”
> 500 million users
50% log on in a given day
36% of time on the internet
70% of Facebook Users outside the US
Average User:
130 “friends”
80 community pages, groups, events
90 pieces of content each month
> 55 minutes per day on Facebook
Psychiatry in the Age of Facebook:

Implications for Patients and Society
Possible Societal Benefits of Social Networking

Increased “social capital”

Bridging Capital

Bonding Capital
Possible Societal Benefits of Social Networking

- Increased “social capital”
- Maintenance of social connections
- Formation of groups based on similar interests
- Practical benefits
- Possible increase in productivity
Possible Societal Harms of Social Networking

- Decreased quality of interpersonal communication
- Prevent the establishment of mature relationships
- Ability to propagate harmful/malicious content
- Possibly addictive
- Prolong the “normal” narcissism of adolescence
WHAT HAVE YOU DONE IN YOUR LIFE?

DIDN’T YOU READ MY TWEETS?

THE LAST JUDGEMENT - PART 9

Source: Oliver Widder, Geek & Poke blog, Apr. 26, 2008
Texting and risk-taking

- Survey of 4000 students at 20 urban high school
  - 20% sent ≥120 texts per day
    - These were 3.5x more likely to have had sex than others
  - 10% spend ≥3 hours per day on social networks
  - 4% do both
    - These were at 2x the risk for fighting, smoking, binge drinking, becoming cyber-victims, thinking about suicide, missing school, and dozing off in class

S Frank, APHA conference, 2010
Survey Results

- Do GAP members text with patients?
  - (0) 0% almost always
  - (6) 3.4% routinely
  - (5) 2.8% sometimes
  - (11) 6% rarely
  - (150) 84% never

![Chart showing texting with patients](chart.png)
Survey Results

- What are the contents of GAP members’ texts to patients?
  - (24) appointments
  - (2) clinical information
  - (2) medication management
  - (5) therapeutic information
  - (3) respond to patients’ request for clinical info
Megan Meier  Tyler Clementi
Psychiatry in the Age of Facebook:

Private vs. Professional Identities: The Online Presence
Cyber Identity - Physicians

- Medical Students, Residents and Facebook
- Online Posting by Medical Students
- Professional or Personal Identity?
Survey Results

- **How Many GAP Members Post Online?**
  - (4) 2.3% almost always
  - (17) 10% routinely
  - (13) 7.6% sometimes
  - (46) 27% rarely
  - (92) 53% never
Survey Results

- How Many GAP Members Restrict Online Personal Information?
  - (67) 42% almost always
  - (25) 16% routinely
  - (9) 5.6% sometimes
  - (5) 3% rarely
  - (53) 33% never
Professional…but Inappropriate?

The Medical School Skit
Psychiatry’s Online Presence

- Pro-Psychopathology Web Sites
  - “Pro Ana” and Suicide Forums

- The Antipsychiatry Coalition
“Googling” Doctors - What Can One Find?

- Training, Board Certification, Publications
- Performance Data
- Disciplinary Action, Malpractice Suits
- Mortgage Deed, Marital Status, Political Views
- Criminal Background
- Slanderous Information
Survey Results

- How Many GAP Members “Google” Themselves?
  - (4) 2% almost always
  - (18) 10% routinely
  - (51) 29% sometimes
  - (78) 45% rarely
  - (22) 13% never
“Googling” Patients – What Can One Find?

- Clinically Useful Information

- Information that Patients May Not Tell You…
  - Public Records (criminal, tax, marriage, etc.)
  - Posts to Social Networking Sites

- Ethical Problem – Handling the Information?
Survey Results

- How Many GAP Members “Google” Patients?
  - (2) 1% almost always
  - (2) 1% routinely
  - (7) 4% sometimes
  - (48) 28% rarely
  - (110) 65% never
And - Info From Social Networking Sites

- A New Ethical Issue
- The “Friend Request”
Survey Results

- Have you experienced positive outcomes from social networking?
  - (5) 3% almost always
  - (32) 21% routinely
  - (54) 36% sometimes
  - (18) 12% rarely
  - (40) 27% never
Survey Results

- Have you experienced negative outcomes from social networking?
  - (2) 1% almost always
  - (6) 4% routinely
  - (23) 14% sometimes
  - (31) 19% rarely
  - (97) 62% never

![Negative Outcomes from Social Networking (N=159)](chart.png)
Survey Results

- Common negative outcomes from social networking
  - Miscommunication (6x)
  - Excessive e-mailing and information from patients/families (4x)
  - Suicide threats or threatening content (3x)
  - Facebook Woes – requests and denials (3x)
Psychiatry in the Age of Facebook:

Guidelines
"I'll be happy to give you innovative thinking. What are the guidelines?"
What’s out there

- Email
- Social Networking
- Patient-targeted googling (PTG)
- Texting
- Online presence
- Ethics
- Professionalism/Education
Email Guidelines

- Establish turnaround time and types of transactions
- Inform patients about privacy issues
- Establish types of transactions
- Print all messages in chart
- Avoid sarcasm, anger, etc.
- Get informed consent

Kane and Sands, *JAMIA*, 1998
Survey Results

How many GAP members email patients?

- (4) 2.2% almost always
- (8) 4.5% routinely
- (43) 24% sometimes
- (62) 35% rarely
- (55) 31% never
Survey Results

- What are the contents of GAP members’ emails to patients?
  - (90) appointments
  - (24) clinical information
  - (27) medication management
  - (26) therapeutic interventions
  - (36) respond to patients’ request for clinical information
Survey Results

- Do GAP members get authorization to email patients?
  - (51) 44% never request permission
  - (57) 50% get verbal permission
  - (8) 7% get written permission

![Authorization to Email Patients (N=116)](chart.png)
Social Networking Guidelines

- Avoid dual relationships by not immediately accepting an invitation to become an online friend with a patient.
- Respect patients' privacy by carefully managing any information garnered about them on social networking sites or from other online information sources.
- Exercise restraint when disclosing personal information on social networking sites or other sites on the internet.
- Read and understand the site's privacy settings in order to maintain control over who can access one's online profile.

Patient-targeted Googling

- Why do I want to conduct this search?
- Would my search advance or compromise the treatment?
- Should I obtain consent to do so?
- Should I share the results of the search with the patient?
- Should I document the findings in the medical record?
- How do I monitor my motivations and the ongoing risk-benefit profile of searching?

Clinton, Silverman, and Brendel, *Harv Rev Psychiatry*, 2010
What’s missing

- Texting, online presence

- Comprehensive guidelines covering the various modes of electronic communication

- Discipline-specific, endorsed guidelines
Why there are few guidelines

- New technologies are emerging quickly
- Few legal precedents
- Generation GAP
What’s needed in a guideline

- A comprehensive set of guidelines covering issues of treatment frame, patient privacy, medico-legal issues, and professional issues, across multiple domains of electronic communications that addresses discipline-specific issues and is accepted by the professional community as the standard of care.
Treatment frame

Patient privacy

Medicolegal issues

Professional issues

Online presence

Social networking

Texting

Email
Treatment frame

- Establish acceptable means of communication
- Establish expected turn-around time
- Avoid friending a patient
- Discuss friending requests with patients
- Consider how to respond to requests to view online information about a patient
- Are your decisions going to advance or hinder treatment
What information gathered online enters a patient’s chart?
- Security of electronic communication (with patients, other clinicians)
- Security of electronic devices (phone, computer, etc.)
- Understand your institutions guidelines/policies
- Create your own guidelines
- Obtain written informed consent from patients about expectations for communication, turn-around time, potential risks and benefits of electronic communication

**Medico-legal issues**
- What is out there about you?
- Think twice about posting material online about yourself
- Understand the privacy settings of the online sites you use

**Professional issues**
The following will be added to the GAP website

- This presentation
- Annotated bibliography
- Link to AADPRT bibliography
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