

Yelped: Psychotherapy in the Time of Online Consumer Reviews

Keely Kolmes, PsyD

Private Practice, Oakland, CA

Daniel O. Taube, JD, PhD

California School of Professional Psychology, Alliant International University

Author Note

Keely Kolmes, Private Practice, Oakland, California.

Daniel O. Taube, California School of Professional Psychology, Alliant International University, One Beach Street, Suite 100, San Francisco, CA 94133.

KEELY KOLMES earned their PsyD in clinical psychology from CSPP at Alliant International University in 2003. Dr. Kolmes is Chair of the California Psychological Association's Ethics Committee and serves as CPA's Council Representative to APA. Dr. Kolmes became a Fellow of APA Division 42 in 2015. Their professional interests include internet and social media, ethics, and sexual and gender identity issues.

DANIEL O. TAUBE earned his JD from Villanova University in 1985 and his PhD in clinical psychology from Hahnemann University in 1987, as a member of the Hahnemann/Villanova Joint Psychology and Law Graduate Program. He recently retired from his position as Professor at the California School of Professional Psychology, San Francisco at Alliant International University, and is currently a member of The American Insurance Trust's Risk Management team. His areas of professional interest include ethical and legal issues in professional practice, child protection and disability studies.

Correspondence concerning this article should be sent to Keely Kolmes, 1904 Franklin Street, Suite 415, Oakland, CA 94612. Email: drkkolmes@gmail.com

Phone: 415-501-9098.

Abstract

Consumer review sites have been an ongoing thorn in the side of mental health practitioners, because unlike other businesses, psychotherapists cannot ethically respond to online reviews. Over the past decade, the authors have observed an increasing concern about the impact of online reviews in their ethical and risk management consultations to psychotherapists. Although professional ethics codes prohibit soliciting testimonials from current clients or those vulnerable to undue influence, this does not prevent clients from choosing to leave their own, unbidden reviews. This study involved a survey of psychotherapy clients who had either left or discovered an online review about a current or former psychotherapist. Our questionnaire sought to understand the nature of the review, whether it was discussed in treatment, and if and how online reviews affected the client's overall feelings, beliefs and attitudes regarding their psychotherapy. About a quarter of our participants found reviews and about sixteen percent left them. Most didn't believe reviews had an impact on their feelings about psychotherapy, but those who did felt more validated in their feelings about their treatment. Reviews left by clients were more generally positive. We also offer suggestions about how psychotherapists can address online reviews in treatment.

Keywords: Internet, social media, psychotherapy, Yelp, online reviews

Clinical impact statement

This manuscript describes the experiences of psychotherapy clients who have left or found online reviews about a current or former psychotherapist. It describes the nature of the review,

© 2019, American Psychological Association. This paper is not the copy of record and may not exactly replicate the final, authoritative version of the article. Please do not copy or cite without authors' permission. The final article will be available, upon publication, via its DOI: 10.1037/pri0000093

and how online reviews affected the client's feelings about the psychotherapy. We also offer suggestions for how psychotherapists can address online reviews in treatment.

Yelped: Psychotherapy in the time of online consumer reviews

The availability of online feedback regarding businesses and service providers of all kinds has, according to many commentators, changed the manner in which people seek and engage with such businesses (e.g., Lee & Ro, 2015; Zhang, Ye, & Law, 2010). From hotels to automobiles to technology to healthcare, consumer reviews have become one of the primary means by which businesses are found, evaluated and chosen by their respective clients. Although the relationship between online consumer reviews and business success is not a simple one, the general assumption is that those businesses with high marks will gain advantages, and those with low marks will lose business (Agnihotri & Bhattacharya, 2016; Fagerstrøm, Ghinea, & Sydnes, 2016; Zaroban, 2015). Healthcare providers generally, and psychotherapists in particular, have increasingly become subject to such reviews. For example, one need only search Yelp or Healthgrades to find information about thousands of mental health providers across the United States. And according to Loria, 72% of patients use online reviews as an initial part of seeking a new health care provider (n.d.).

Although some two thirds of all reviews left on Yelp and similar sites are positive (Bassig, 2015), as are a smaller majority of reviews of healthcare providers (Loria, n.d.), negative online feedback naturally causes the most concern among professionals. In her article regarding the impact of negative online feedback on attorneys, Burke-Robertson (2016) argued that professionals “face a triple whammy. The review upsets the power balance between attorney

and client, it threatens the attorney's professional identity, and it risks harming the attorney's financial success” (p. 114). Our view is that there are similar and significant effects on psychotherapists, and that the additional experience of public humiliation adds a fourth, rather striking dimension to this experience. Thus it is not surprising that negative reviews receive the lion's share of attention. And yet, psychotherapy clients' experiences of these reviews have received no attention.

Thus, it is clear that when unsatisfied, some clients express their dissatisfaction publically. The frequencies of doing so, however, are not clear, and the experiences of those psychotherapy clients who use review sites are even less so. There is the additional phenomenon of those who have a strongly positive connection with a mental health professional who discover damaging reviews about their provider and the potential impact on their psychotherapy of this kind of discovery. There has been almost no literature in regard to how reviews affect psychotherapy clients. Thus, as part of a broader study of clients' use of online personal and professional information regarding psychotherapists, we sought to explore the frequency of finding and posting reviews of psychotherapists, and the clients' reports of the impact these activities had on beliefs and attitudes toward their treatment and their providers.

The Survey

We conducted an online survey to explore the experiences of clients who had intentionally sought or accidentally stumbled upon their psychotherapist's personal or professional data on the Internet. Our recruitment message noted: “To be eligible for the study, you must be 18 or older, currently in psychotherapy, or have been in psychotherapy in the past, and have encountered or sought information about your therapist on the Internet.” We asked clinicians and non-clinicians to post this notice on various social media sites, blogs, Twitter,

Facebook, mental health support forums (websites focusing on peer support), and listservs (closed email lists created to offer support to people in psychotherapy for various issues). We also created a Facebook page to promote recruitment.

Our recruitment sought participants who discovered personal online information, professional online information, or both, about their psychotherapists. It did not specifically target participants who had either found or left online reviews. However, this paper focuses on the aspects of the study solely related to clients seeking, coming across or leaving online reviews of their psychotherapists'.¹ The survey was constructed to determine where the feedback was discovered or posted, what led clients to conduct searches, and how the discovery of online information affected participants' beliefs about their psychotherapists and the services they received. The sample included participants who sought this information to decide whether to enter or continue treatment with a given clinician.

Four hundred and eighty-eight respondents initially accessed the survey, and 349 completed it (72% completion rate). We then filtered participants in two stages: first, we included only those who had been in psychotherapy and reported finding professional information about their clinician online, which resulted in a total of 305 participants. Next, we narrowed the respondents to include only those who reported that they had either left an online review regarding their psychotherapists, or found a review ($n = 131$), which constituted 43% of the total of 305 participants. Of this group of 131 participants, thirty-six percent ($n = 49$) left a review and 64% ($n = 82$) found a review. It should be noted that these two groups were not independent, as 28 participants said yes to both.

¹ Please see [name deleted to maintain the integrity of the review process] for a full description of the method and dataset.

Among the participants who had left reviews, 90% ($n = 44$) were in treatment at the time of the survey. Ages ranged from 18 to 60 years. Most were female (94%; $n = 46$), heterosexual (65%; $n = 32$) and Caucasian (89%; $n = 44$). Most did not live with a disability (78%; $n = 38$). Income ranged from \$0 to over \$200,000 annually. Almost three quarters (69%; $n = 34$) lived in a large or small city. Nearly ninety-six percent (96%; $n = 47$) lived in the United States and 4% ($n = 2$) lived in other countries, including Canada and the United Kingdom.

Among the subgroups of participants who had found online reviews regarding their psychotherapists, 78% ($n = 64$) were in treatment at the time of the survey. Ages also ranged from 18 to 60 years. Most were female (92%; $n = 75$), heterosexual (71%; $n = 58$), Caucasian (88%; $n = 72$), and did not live with a disability (73%; $n = 60$). Income ranged from \$0 to over \$200,000 annually. Some two-thirds (66%; $n = 63$) lived in a large or small city. Over eighty four percent (84%; $n = 69$) lived in the United States and 16% ($n = 13$) listed other countries, predominantly Canada and the United Kingdom. We found no significant relationships between age, gender, ethnicity, sexual orientation or disability and finding or leaving online reviews. Nor were there any significant relationships between these demographic variables and the impact of finding a review. A larger scale study might reveal some differences.

Procedures

The recruitment announcement informed participants that the study focused upon experiences of psychotherapy clients who had accessed personal or professional information about their clinician on the Internet. A link to a SurveyMonkey questionnaire was provided, and potential participants were brought to a page that gave detailed information about the anonymous

survey. Study procedures were conducted in compliance with our university's Institutional Review Board requirements.

Measures

The survey² consisted of 98 items, of which 15 were related to the experience of leaving or finding online reviews of one's psychotherapist on the Internet. It included a combination of multiple response, Likert and open-ended items. Participants were asked questions about the details of accessing their psychotherapist's information online, and about their experiences and beliefs about the effects of these encounters on their views of their psychotherapists and their treatments.

Results

Clients Finding Reviews about Their Current Psychotherapist

Of the 82 participants who found online reviews about their psychotherapist, 57% ($n = 47$) noted that the review was positive, 26 (32%) found mixed reviews, and 9 (11%) found negative reviews. Fifty-one respondents (62%) did not believe that the review had any effect on their feelings about the treatment they received, 16 (20%) believed it had affected their feelings about treatment, and 15 (18%) said "other." Those respondents in this latter group provided more information about the impact of the reviews, such as that negative reviews about a former clinician reinforced a client's feelings that their clinician was not good, and that finding positive reviews about a psychotherapist who was a better fit, helped validate the person's experience. There were seven comments echoing this sense of validation. One individual reported that seeing online reviews made their experience of psychotherapy seem "less personal, which was not a

² Copies are available from the first author.

positive thing for me.” Another respondent shared, “I was upset that the therapist was so close to that other person.”

Clients Finding Reviews about Their Former Psychotherapist

Clients also were asked about the influence of seeing the online reviews of a former psychotherapist on their feelings about their treatment. Twenty people (65%) noted that they had mixed feelings, ten people (32%) felt better about the treatment they received, and five (16%) felt worse. Qualitative responses included: “...It made me feel like her arrogant treatment of me wasn’t all my fault but just how she was generally. So it was good in that it helped me have more peace about ending therapy with her.” Another person noted: “When I read a positive comment about a therapist I had who I disliked, I briefly wondered if my criticisms about this therapist were misguided...”

Clients were asked about the feelings they experienced when seeing reviews of a former or current psychotherapist. One participant noted: “...I sensed these things were odd, but it wasn't until ending my relationship with her that I happened to read some negative reviews on YELP about her style and it was affirming to know that others felt the same way about her.” (See Table 1 for a complete list of responses.)

Clients Leaving Reviews about Their Psychotherapist

When asked if they had left an online review about a psychotherapist on a site such as Yelp, Healthgrades, Yahoo Business, or another site, 49 (16%) of our participants indicated that they had done so. Thirty seven of those who left reviews (76%) indicated that their review was positive, 11 (22%) noted that it was negative, and 3 (6%) indicated that it was mixed. When asked if they intended to return to the psychotherapist in the future, twenty-nine (59%) of these individuals noted that they are still working with this clinician, five (10%) thought they might

return, two (5%) definitely intended to return and fourteen (29%) indicated no intention to see this psychotherapist again. Those clients who had left a review of their psychotherapy while still in treatment were asked whether they discussed the review they had left with their psychotherapist. Thirty people (88%) reported that they had not discussed it and four (12%) reported that they had. Three of the four who discussed it, initiated the discussion of their review. One person noted that their psychotherapist asked them to write the review. We asked about the clients' experience of these conversations. One person shared, "she sent an email to all clients letting us know about her presence on a review site and asking that if we felt inclined to write one, but that she in no way expected us to and that it would not require identifying personal information. I was totally fine with this request and the conversation." Another participant noted sharing with the clinician that they had found other online reviews and so had left one as well.

Participants were asked if they ever changed a review they had written about a psychotherapist. Forty-six (94%) said no and three (6%) said yes. Of the three who changed their reviews, reasons given included changing their mind about a positive review after a psychotherapist was repeatedly late, another person reported that the drop-down window on Healthgrades malfunctioned and they have been emailing the site trying to correct what was an accidentally negative review, and a third person noted that their psychotherapist contacted them and asked for the review to be changed or deleted. In the qualitative responses, one client noted that "the fact that my therapist asked me to change the comments made me feel bullied." Another noted, "I left a positive review because I felt that another client had left an unfair negative review."

Other Modes of Feedback

Prior to the questions about leaving online reviews, participants were asked whether they had ever given positive or negative feedback to a psychotherapist, in person. Thirty-six people (73%) in the group of those who left online reviews said they had given positive feedback, thirty-five (71%) had given mixed feedback, twenty-two (45%) reported giving negative feedback, and three (6%) people had not given any feedback.

We asked those who found reviews if they had ever reported a psychotherapist to an ethics or licensing board after or in place of leaving an online review. Eighty (98%) of those who had found reviews had never made a report. In both groups, one person did so in place of leaving a review and one person did so after leaving the review. One person (1%) claimed to have started the process of reporting someone to APA but they did not follow through because the process made them feel too anxious.

Discussion

Our participants discussed the impact of discovering or leaving an online review about their psychotherapists. One quarter of our sample had found online reviews about their clinician and somewhat less than a sixth left an online review about their clinician.

Among those who found negative reviews, most people did not believe the review had an impact on their feelings about treatment. This is a helpful finding because it may lay some providers' fears to rest and it suggests a higher level of sophistication in psychotherapy clients' ability to be discerning consumers and readers of online reviews. Online reviews may not have the type of negative impact that psychotherapists' fear. It seems some psychotherapy clients are able to balance negative reviews with their own experience with the psychotherapist along with their judgments about the credibility of the review and reviewer.

Nevertheless, there was a sizeable minority of participants who reported being affected.

For those who were affected, there was some indication that it helped validate the client's feelings about their experience in treatment. Others disliked the feelings evoked by reading reviews, indicating that even positive reviews about one's psychotherapist can bring up feelings of possessiveness or jealousy that others have experienced closeness and connection to the same psychotherapist. Our findings suggest how "third party" commentary may, for some clients, affect this very personal relationship.

The reviews that were left by our participants were largely positive. Regardless of the tone of the review, we are concerned about the apparent potential for digital culture to lure clients to make public their personal psychotherapy for reasons other than sharing their satisfaction about effective treatment. For example, one individual noted leaving a positive review because they believed another client was unfair with the review of his clinician. Though it could be that such disclosures could represent a de-stigmatizing of mental health care, it is unclear about whether those who are leaving online feedback believe these reviews are anonymous.

Some of the above findings are intriguing, as many clinicians focus strongly on their concerns about how negative reviews may affect those people who are thinking of becoming clients of their practices. Fewer clinicians likely entertain the possibility that even positive reviews may create feelings of discomfort for current clients. Further, our data suggest that only a minority of clients talk about their own online reviews with their psychotherapists, and we cannot know at this point how often clients bring up the impact of other clients' online reviews in the psychotherapeutic relationship. This would be a good question for future research with both clinician and client samples. We also believe it may be important for clinicians to address in their informed consent process and during psychotherapy that such intrusions into the clinical

relationship can include discovery of news items and online reviews, and to encourage clients to bring such issues into the treatment so that they can be discussed. Otherwise, clinicians may never know that a client is defending their reputation on an online site, or is conflicted about their own experiences as opposed to those of others. Informed consent can also let clients know that though they may attempt to make their reviews anonymous, leaving reviews can lead to unintentionally identifying the client, could disclose that the person was in psychotherapy and may affect the client in unanticipated ways.

What also became apparent from participants' responses was that discovering online reviews about a psychotherapist can change people's perceptions when they read any commentary about the clinician. Though this was not a common experience in our sample, it is worth noting that online reviews can either validate or cause a person to question their perceptions about the quality of the treatment they received. Although such events might also be neutral in regards to the psychotherapy relationship, it's not difficult to imagine a particularly sensitive or anxious patient believing that they could not trust the therapeutic relationship or their reactions within it. Also, discovering feedback during a particularly challenging point in the psychotherapeutic process may be disruptive for some clients and for others may enhance their experience with their psychotherapist.

In regards to leaving reviews, a relatively small proportion of our sample did so. Most of those who did were moved to leave a positive review and a majority of those who left a review were still working with the clinician. This finding raises other questions such as whether the review was left during a pause in treatment and what the impetus for the review was. It was not clear whether a particular event in the psychotherapy inspired the review or whether these clinicians are requesting reviews from current clients. This is a question that should be clarified

in future research. Most clients did not discuss the review with their clinician, which leads us to believe they were unsolicited. Only one participant indicated that the psychotherapist solicited the review, which would mean this clinician violated a current ethical standard that prohibits the request of testimonials from current clients (Standard 5.05; American Psychological Association, 2017). The example by a participant of a clinician sending an email to all clients inviting reviews but saying it was not “expected” suggests a mixed signal. This participant noted being “totally fine” with the request, but we do not know how all of the other clients felt about such an invitation, let alone a form letter or a mass email sent to all clients. It is unclear how this person knew this communication went to all clients. It should also be noted that asking clients to leave an online review while noting it “would not require identifying personal information” conveys a lack of awareness of many online review systems which do gather information such as email addresses, social connections, and other businesses frequented. That said, though it is feasible for clients to create “dummy accounts” to leave anonymous reviews, it is not typical. Nonetheless, we have concerns about even a very few clinicians luring clients to reveal their private psychotherapy relationships in order to protect or enhance the clinician’s reputation. We consider verbal and written requests of current clients to leave reviews to be leveraging of psychotherapists’ unique position with clients to ask them for a favor that serves the clinician’s business interests, rather than being in any manner necessary for their psychotherapy. It also takes advantage of client’s dependence on and trust of the psychotherapist. Indeed, in addition to the ethical concerns about soliciting testimonials (Kolmes, 2012), we believe that such requests may well have lingering effects on clients’ experiences of their clinicians and their psychotherapies.

Most clients did not return to change their review, a finding that may be of interest to

clinicians who wonder whether they should talk to people about negative reviews. Only three participants changed a review once it was written: one due to a glitch that recorded inaccurate information, one because they decided their clinician did not deserve the positive review they had left, and one because the clinician contacted them and asked for removal of the review. This was an exception to the rule. That being said, having a psychotherapist contact a client to request removal or revision of an online review raises a number of clinical and ethical issues including the potential for undue influence, a sense of coercion on the part of the client, and a potential conflict of interest or multiple relationship since this is not part of the treatment relationship (in that it becomes a marketing relationship). We also believe that contacting a client and requesting revision of a testimonial violates the basic notion of not soliciting testimonials from clients or those vulnerable to undue influence. An alternative for ongoing clients would be to bring the review into the treatment and discuss it, with no accompanying request to change it. There may be cases, regarding former clients, in which it makes sense with consultation and a consideration of the previous clinical relationship, to contact the former client simply to discuss the review (not requesting any changes). The goal would be both to offer the client an opportunity to resolve distress about a negative experience they may have had, and also to learn more about any significant negative patterns clients are having that may inform this clinician's work. Still, clinicians should use caution in thinking through whether to bring the issue of feedback into psychotherapy since this could be experienced as a negative confrontation by some clients and could negatively affect the treatment or compound an existing problem.

Interestingly, no participants in our sample, and in particular, none of the eleven who left negative reviews, had ever reported a psychotherapist to an ethics or licensing board in place of an online review. Although dated, Neukrug (1992) found that this lack of reporting was fairly

common. Good questions for future research would be to determine whether these base rates are still very low, and if so, why? Is this because the disliked behavior was not egregious enough? Or are online review sites providing the type of immediate “relief” that clients are seeking, whereas an ethics or licensing board complaint may be more time consuming or, as one participant put it, anxiety producing? These questions would be useful to ask of a client sample in a future study. One participant did make a report in place of an online review and one followed up a review with a formal complaint.

We suggest that clinicians regularly search for reviews of their business to become aware of what information about their practices is available to current or potential clients. Routine searches would be useful to prepare the psychotherapist for the possibility that clients may wish to discuss something they have seen online. Knowing what they will find can help the clinician address and work through what could be a strong reaction, prior to it emerging in the psychotherapy. Such in-session discussions about how online ratings by other psychotherapy clients are affecting the client should be addressed in a thoughtful, reflective manner. We generally do not recommend responding on the review sites themselves to online reviews, except for providing general policies. Our concerns are that psychotherapists still have an ethical duty to maintain confidentiality for clients, even those who left online reviews. In addition, responding to online reviews also contradicts the structural expectation of how conflict is managed in psychotherapy. We also do not believe that public postings are an effective means of resolving interpersonal conflicts of this nature, and for psychotherapy practices, in particular.

However, some clinicians invite colleagues with whom they have consulted to leave reviews. Such reviews run the risk of being removed by consumer review sites if the reviewer is perceived to have not been a “consumer of the service.” Others encourage clinicians to post their

own policies (Kolmes, 2009) on such review sites prior to anyone else leaving reviews to explain our ethical duty to maintain confidentiality. Such language can also explain that the clinician's presence on the site should not be misread as a request for a testimonial. It can also be clarified that the absence of a response would not be misunderstood as an agreement to the criticism. It can also serve to demonstrate one's openness to feedback within the actual psychotherapy and within the strictures imposed by a public forum. Developing a stronger web presence through creating positive online content is another method that may overshadow online reviews. Reputation management companies offer such relief—at a significant cost—to clinicians dealing with negative reviews, but the data are sparse as to the effectiveness of such services.

Conclusions

Suggestions for psychotherapists

The context of psychotherapy has changed significantly with the increasing use of digital technology to find and then evaluate clinicians. As Kolmes (2010) and The Trust (n.d.) have recommended, one response to this change is for psychotherapists to introduce electronic and social media policies into their practices. We recommend that in these policies, clinicians invite their psychotherapy clients to share anything they may find on the Internet that could affect the clinical relationship. Such items may include news articles or online reviews. We are strong advocates for normalizing the discovery of such materials so that clients can feel comfortable discussing such found items if they have an impact on treatment. Some clinicians have taken to including information on their business listing sites or in their policies making clear that a presence on such a site is not a request for or invitation for online reviews or testimonials. Clinicians who are concerned about accumulating negative reviews may wish to consider

implementing the routine use of outcome or treatment satisfaction data for all clients in their practices (e.g., Session Rating Scales; Duncan et al., 2003; Kolmes, 2012). This would allow clients who have been reluctant to bring up issues in treatment to have another vehicle by which to express both satisfaction and dissatisfaction with clinical services. It also dovetails with the research showing that allowing for feedback about the alliance may improve that crucial aspect of the psychotherapeutic relationship (Duncan & Reese, 2015; Mikeal, Gillaspay, Scoles, & Murphy, 2016). Asking for such information can communicate an openness and desire to understand the experience of our clients. For marketing purposes, some psychotherapists may wish to make such aggregate data available on their own websites. But if clients perceive this request to be primarily for marketing, rather than improving services, it may have an adverse effect on clients. We, of course, continue to advise clinicians to follow their respective ethics codes and not solicit testimonials or reviews from current clients or those who could be vulnerable to undue influence. We also recommend that clinicians not ask their clients to change an online review, even if the review comes up as a clinical discussion topic. Clinicians may wish to routinely check their data on various consumer review sites so that they are aware if any information written about them may be visible to clients. Such monitoring of sites would allow clinicians to obtain clinical, ethical, or risk management consultation to prepare for such conversations before they unexpectedly enter into the treatment room.

Suggestions for Future Research

Although the above findings are suggestive, our sample was small, which can compromise representativeness. As such, future studies would benefit from larger sample sizes and attempts to better approximate randomization on Internet research platforms. Further, additional studies could test the reliability and validity of the questionnaire we used so as to

establish a better baseline of knowledge regarding its strengths and weaknesses and aid in the development of more refined measures.

Participants' answers to both the quantitative and qualitative questions point to some further avenues of investigation relevant to refining ethical practice and promoting pragmatic approaches to the ever-evolving digital world. First, it would be useful to gain more of an understanding regarding the potential negative impact on clients, and perhaps even on treatment, of positive online reviews. The assumption that positive reviews would fairly uniformly promote clinicians' practices, and an underlying assumption that it would thereby increase the effectiveness of treatment, is at least called into question by our results. Though it is not surprising that client's responses would be complex, this is an area of focus that, to our knowledge, has heretofore received no attention in the literature.

It would also be useful to learn more about the factors involved in preventing or enhancing clients' comfort, willingness and ability to provide direct feedback to their clinicians. For example, would the use of session rating scales, outcome assessments, or invitations for direct feedback on a regular basis affect clients' likelihood of leaving online reviews? Might it also have an impact on the quality of those reviews? Also, there may perhaps be a relationship between client diagnosis and many of the aspects of finding or leaving reviews, in addition to choosing to share feedback. This question would be useful to explore.

An additional area of focus could be on whether, and to what extent, the outside information clients obtain has a lasting effect on their treatment experience and their reported willingness to use services in the future. We could not find any research on the impact on leaving or writing online reviews on the psychotherapy relationship or on outcomes. This is an area that

would be important to study. Similarly, how psychotherapists are addressing this issue has received limited attention. Such practices should be studied, as well.

References

- Agnihotri, A., & Bhattacharya, S. (2016). Online review helpfulness: Role of qualitative factors. *Psychology & Marketing, 33*(11), 1006-1017. doi:10.1002/mar.20934
- American Psychological Association. (2017). *Ethical Principles of Psychologists and Code of Conduct* (2002, Amended June 1, 2010 and January 1, 2017). Retrieved from <http://www.apa.org/ethics/code/index.aspx>
- Bassig, M. (2015, March 18). *Did you know? 67 percent of all Yelp reviews are 4 or 5-Star?* Retrieved from <https://www.reviewtrackers.com/know-67-percent-yelp-reviews-4-5-star-reviews>
- Burke Robertson, C. (2016, Winter). Online reputation management in attorney regulation. *Georgetown Journal of Legal Ethics, 29*, 97-152.
- Duncan, B., Miller, S., Sparks, J., Claud, D., Reynolds, L., Brown, J., & Johnson, L. (2003). The Session Rating Scale: Preliminary psychometric properties of a “working” alliance measurement. *Journal of Brief Therapy, 3*(1), 3-12.
- Duncan, B. L., & Reese, R. J. (2015). The Partners for Change Outcome Management System (PCOMS) revisiting the client’s frame of reference. *Psychotherapy, 52*(4), 391-401. doi:10.1037/pst000002
- Fagerstrøm, A., Ghinea, G., & Sydnes, L. (2016). Understanding the impact of online reviews on customer choice: A probability discounting approach. *Psychology & Marketing, 33*(2), 125-134. doi:10.1002/mar.20859
- Kolmes, K. (2009). Articles for clinicians using social medial. Retrieved from <http://drkkolmes.com/clinician-articles/#yelp%20&%20business%20review%20sites>

Kolmes, K. (2010). *My private practice social media policy*. Retrieved from

<http://drkkolmes.com/social-media-policy/>

Kolmes, K. (2012). *Yelp-proof your clinical practice – alpha launch!* Retrieved from

<http://drkkolmes.com/2012/11/05/yelp-proof-your-practice-alpha-launch/>

Kolmes, K. (2012, September 17). Social Media in the Future of Professional

Psychology. *Professional Psychology: Research and Practice*. Advance online publication. doi:10.1037/a0028678

Loria, G. (n.d.). *How patients use online reviews*. Retrieved from <https://www.softwareadvice.com/resources/how-patients-use-online-reviews/>

Lee, S. H., & Ro, H. (2016). The impact of online reviews on attitude changes: The differential

effects of review attributes and consumer knowledge. *International Journal of*

Hospitality Management, 561-9. doi:10.1016/j.ijhm.2016.04.004

Mikeal, C. W., Gillaspay, J. J., Scoles, M. T., & Murphy, J. J. (2016). A dismantling study of the

Partners for Change Outcome Management System. *Journal of Counseling Psychology*,

63(6), 704-709. doi:10.1037/cou0000168

Zhang, Z., Ye, Q., Law, R., & Li, Y., 2010. The impact of e-word-of-mouth on the online

popularity of restaurants: A comparison of consumer reviews and editor reviews. *The*

International Journal of Hospitality Management, 29(4), 694–700.

Zaroban, S. (2015). Product reviews boost revenue per online visit 62% [Blog post]. Retrieved

from [http://blog.idsfulfillment.com/news/product-reviews-boost-revenue-per-online-visit-](http://blog.idsfulfillment.com/news/product-reviews-boost-revenue-per-online-visit-62)

[62](http://blog.idsfulfillment.com/news/product-reviews-boost-revenue-per-online-visit-62).

Table 1

Feelings experienced by clients when seeing reviews of current or former psychotherapists

Emotional Response	N (%)
Interest	34 (41)
No significant feelings	21 (26)
Reassurance	20 (24)
Protectiveness	19 (23)
Loyalty	17 (21)
Annoyance	16 (20)
Disappointment	12 (15)
Distress	11 (13)
Discomfort	11 (13)
Pleasure	11 (13)
Pride	11 (13)
Relief	11 (13)
Surprise	10 (12)
Anger	9 (11)
Anxiety	9 (11)
Insecurity	8 (10)
Sadness	8 (10)
Regret	5 (6)
Shame	5 (6)
Disloyalty	4 (5)
Other	4 (6)
Grief	3 (4)
Guilt	3 (4)
