

A Dialogue on Confidentiality in Therapy

By Peter Philippon and John Bernard Harris

John: I'd like to start by noting that "client confidentiality" is a familiar and important theme not just in therapy, but in a whole range of 'professional' relationships - lawyers, doctors and bank managers would all have some idea of it, though I guess it would change from context to context. It's part of what people are paying professionals for.

Peter: Yes, though I wonder to what extent people expect confidentiality because they've learned it's part of the service, rather than each individual person deciding in each case that they actually need it. And then what does it mean in different contexts, what are the limits of it, when is it wrong? And whose benefit is it for?

John: The assumption is that it protects the client. And yet we know that the secrecy it entails can also be used to protect professionals when they have done something they don't want talked about...the 'shadow side' of confidentiality, if you like...we need to return to this theme. Before we do, I'd like to step back and ask whether this idea has always been associated with psychotherapy? Presumably Freud had some confidentiality contract with his clients?

Peter: I'm not clear about that with Freud because he certainly wrote up lengthy cases for his colleagues, and not all his clients thought that they were fairly represented in those accounts.

John: But surely there must have been some kind of contract regarding confidentiality...I'd assume so.

Peter: Well, the first psychoanalysts were medical doctors, so I imagine that they took their values and practices from medical ethics. The psychoanalytic relationship was originally modelled on that between doctor and patient, which was presumably confidential.

John: I'd be curious to speculate further - though not right now - on where the whole idea of 'public' and 'private' bits of my life came from. Or the connection between something being personal and it being better kept secret. That does seem to be the central theme here. But before we get onto possible problems with confidentiality, what do you think the benefits are for clients? If, in Gestalt, we are trying to develop a certain sort of relationship with clients, how does it assist that process?

Peter: For me the first point is that there are some elements of confidentiality which really are important. One very positive thing about confidentiality is that it assists clients to have a sense that they control the way that information about themselves is disseminated, not me. It's not taken out of their hands. So even if I'm talking to a friend, there are going to be things that I say that I don't want them gossiping about. And certainly if I am going to somebody and talking about things which aren't public knowledge about me, I'd want to have some kind of control over that. That kind of respect for a person's boundaries is important.

John: So the issue is: "who controls the flow of information about my life?". Or, certain kinds of information we call 'private' or 'personal'. How people draw that distinction, and consider it in relation to others is interesting because it varies such a lot. For instance, the very fact of being in psychotherapy is something that some people would want kept confidential, because they were ashamed to be seen as needing help...

Peter: ...or the information might actually be used against them, if they are public figures of any kind. There was that US presidential candidate, I forget his name, who was forced to withdraw when it was learned he'd been in therapy.

John: Yes, I remember. He cried in public, or something unforgivable, didn't he? Thereby showing he was unstable, according to the press. There are also situations like child custody proceedings where this knowledge might be used.

Peter: Yes, or some employers or insurance companies might use that kind of information to infer that someone was unstable.

John: Which can sometimes lead to funny situations when we bump into clients in town. I might just nod 'hello', but I would always assume that they wouldn't want me to reveal the therapy connection, unless I knew otherwise. But let's get on...Peter - I'm asking you, but I'll come in as well - when you meet someone in a therapy setting and sit down with them, what ideas about confidentiality come into your head?

Peter: I think I need to hold the fact - and this is something Petruska Clarkson once said - that "what we're doing is not shameful". There's nothing wrong in asking for help. It doesn't mean you're crazy (and what's wrong with a bit of craziness anyway...!). For me, there needs to be a balance between the kind of respect we're talking about, and the other side, which is having such a strong boundary between the therapy and the rest of the client's life that there's no transfer across it. So they are doing wonderful things in the therapy, and their lives stay very much the same. What do you think?

John: Well, I've become increasingly aware of the problems inherent in 'strict' confidentiality - and that's certainly one. In the first place I make clear to clients that they choose what they tell me about themselves, and they also need to know that - except within defined limits, supervision and so on - it remains with me. There's also something here about the content of what people say, that the kind of things they are saying are things which it's difficult to say in the first place, then to have them heard by someone else...that process needs some protection. But once you've said it, and - I'm thinking especially of groups - others have witnessed it, and you see it's all right, then you move on, the secret somehow loses its potency. Talking about yourself to others, learning that they too have 'shameful secrets' is so important, I think.

Peter: Which brings me back to this issue about setting up too strict a rule, so you can't talk to anyone other than the therapist about these things. If the boundary between therapy and the rest of the client's life is too strict, then how does the client bridge the gap?

John: People will just break an over-strict rule, won't they, because, let's face it, at some point, maybe right from the start, I will need to talk to other people about what's going on for me, as a way of integrating my therapeutic learning into my life.

Peter: Precisely. It can be counter-productive not to talk to people such as partners, friends. If I don't then I am somehow being extracted from the community, separating myself. I recall Sam Garcia talking at a Gestalt Conference some years ago about his work in the Borders, where they talked not just to patients, but to their family and friends, and thereby established a whole community network for them. It reduced the need for psychiatric in-patient referrals quite markedly.

John: And that reminds me that some years ago when I was doing family therapy as a social worker, we used to have 'network meetings' in which everyone who was connected with a family who were struggling met with them and a facilitator, with their agreement, to talk about the situation, what would help and hinder them. It was fascinating - working simultaneously with the whole 'field' in that way.

Peter: That might be an interesting way for us to work here at the Gestalt Centre...As I've said elsewhere, as Gestaltists, we need to be aware of the idea that relating to the client(s) also involves relating to their environment. So when I work with members of families or couples separately, for example, I will make it explicit that I won't guarantee to keep confidentiality between them between sessions. Nor will I gossip about one to the other. Exploring issues around this rule will often unlock situations held rigid by secrecy.

John: Another area that interests me is how an ethos of secrecy between therapist and client might mirror unhelpful family norms. In sexual abuse, for instance.

Peter: There are a number of abusive families where the way the abuse continued was via confidentiality, and secrecy. You don't tell other people 'outside'. So for them keeping up a strict secrecy code can be part of a retraumatisation as well as a safety-net.

John: So 'not telling others about me' has a particular meaning in such cases. The therapist always needs to know the context to decide the best line to take in advising clients whether to talk about their problems to others.

Peter: Yes. And if confidentiality is an automatic rule, then these issues never get talked about. The other bit for me is where the therapist is abusing the client in some way; how easy it is then to swing to the other side of confidentiality and encourage the client not to talk about what the therapist has done.

John: For me this is about unethical behaviour, but I am also aware when training counsellors how nervous they are about their own competence. In those circumstances, you will want the client to collude with you and not talk about what goes on in sessions, just in case you get found out...it may only be small things I don't do very well, and don't want that known.

Peter: It's almost more about the small things than the big ones. I guess most clients would know that if they were grossly mistreated, they would get support from someone for talking about that.

John: So what we're saying is, in terms of the general balance of power between therapists and clients, it's certainly all too easy for therapists to misuse confidentiality to their advantage.

Peter: Yes. And there are also things that I might say to a client or group about myself that I wouldn't want gossiped around.

John: Would you assume that clients would respect your confidentiality?

Peter: I'm happy for people to talk about the way I work, and they do. I don't usually say things which are that private. I've never felt ripped off, though I might be being ripped off by somebody who gossiped about me indiscriminately.

John: So part of what you're doing, I guess, is modelling an attitude to sharing stuff about yourself. Being open, and so on. And also trusting people to find appropriate contexts in which to talk about you. Those are powerful messages. Anyway, we need to move on...Let's talk about groups.

Peter: Here the situation is different from one-to-one therapy, because other people are present who aren't answerable in the same way the therapist is.

John: Which is why discussing confidentiality is important at the start of any group in which you expect people to talk about themselves. I normally suggest a contract which is in between. On the one side is the secretive 'don't talk about anything to anybody outside the group' kind of rule. It's too strict to keep. On the other, you told me once that some Gestaltists have refused to have

confidentiality rules in his groups on that basis, that 'we have nothing to hide, so why shouldn't we talk about everything to anyone?'; that's the other extreme. It offers no privacy at all, when that may be needed.

Peter: Yes, for me the basis is respect between group members. The rule is, in effect, 'don't gossip about other group members outside the group'. So it's OK for people to talk about themselves, or the group in a general way, what we did as a group, say, but not OK to talk about what others say or do, in any way in which they could conceivably be identified.

John: This seems to work. If you have too strict a rule, no-one will keep to it, the whole idea of confidentiality becomes devalued. Well, we need to finish soon. Can I ask you a difficult one? In what circumstances would you breach confidentiality? What are the limits for you?

Peter: I ask clients to sign a contract which says that I may discuss my work with them in supervision; and with colleagues at the Gestalt Centre. The confidentiality contract I use allows me to contact a client's GP in some kind of emergency - if they are suicidal, for instance, and not enough in contact to make decisions about what's best for them. I'm also prepared to say to someone "I think you should be in hospital" if that's what I think.

John: For me, I would breach confidentiality if I felt a client was dangerous to others - other professionals they were involved with, for instance.

Peter: Or if I have knowledge that indicates that others were in danger of being hurt or abused, I have a citizen's duty to act. For me the most difficult dilemmas are when clients tell me as they quite often do things about other therapists, for instance, that indicate that they are not safe for clients in some way. If the clients says, as they almost always do that they don't want me to act on this information...

John: ... contact the therapist or their professional body...

Peter: Yes, then it is a very difficult situation. I don't have a stock answer to that one.

John: This is a tricky subject. My golden rule is that I will be straight and clear with clients at the start of the relationship. That includes letting them know the limits to confidentiality, in what circumstances I will not 'sit on' things they tell me. Then, they have a choice - if they don't like it, they can find someone else.

Peter: Sometime when I've done that people haven't liked what I've said, or haven't felt comfortable with me taping sessions or whatever. But at least they are clear. Again, with individuals or groups, for me it all comes down to people respecting one another, and not gossiping.

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