



Ethics in Psychotherapy: A Focus on Professional Boundaries and Confidentiality Practices

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Professionalism and therapeutic boundaries

Professionals have special expertise and are given privileges in our society to serve the public as a whole and to serve people as individuals through the use of this expertise. By virtue of this basic social contract, a professional must possess and demonstrate specific knowledge and skills; he or she has a positive duty to use these distinct strengths to fulfill key roles in society with the ultimate aim of bringing about good for others. Professionals are permitted to receive fair and...

Confidentiality and privacy

Psychiatric records, including even the identification of a person as a patient, must be protected with extreme care. Confidentiality is essential to psychiatric treatment. This is based in part on the special nature of psychiatric therapy as well as on the traditional ethical relationship between physician and patient. Growing concern regarding the civil rights of patients and the possible adverse effects of computerization, duplication equipment, and data banks makes the dissemination of...

...

Summary

The practice of psychotherapy gives rise to many ethical dilemmas. In this article we offered a “primer” on the most commonly cited ethical concerns in psychotherapy related to professionalism and therapeutic boundaries and confidentiality. There is no single answer to the varied and complex ethical issues that therapists may encounter in their

treatment of patients. Such dilemmas are dynamic, nuanced, complex, and highly context dependent. Although professional codes offer guidance on optimal...

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First page preview

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KEYWORDS

- Ethics • Psychotherapy • Boundaries • Professionalism
- Confidentiality

Mr. B gives his cognitive-behavioral therapist, Dr. M, a nice and not inexpensive watch. Dr. M wonders whether he should accept the gift, concerned about the feelings of Mr. B, who has only recently begun to make progress in his treatment.

Ms. Y has chronic suicidal ideation and takes an overdose, resulting in her admission to a medical intensive care unit. Her therapist, Dr. T, whom she sees weekly for supportive psychotherapy, feels guilty for not taking her threats more seriously. Dr. T visits Ms. Y and sits with her at the bedside in the MICU.

Dr. C, struggling with his own feelings of depression after a divorce, begins to daydream about "a new life" with a young woman patient whom he sees four times a week for psychoanalysis.

Dr. J is a resident physician in a small community-based training program. She is learning to provide psychotherapy and notices that two of her new patients go to the same coffee shop and grocery store she frequents. She asks her psychotherapy supervisor whether this is a "boundary problem."

Dr. G, an ambitious faculty member at a prestigious medical school, plans to write up case material for an academic journal but wonders if she should obtain her patients' permission first.

These case vignettes illustrate the myriad ways in which ethics issues can present themselves in the therapist-patient dyad. Even the subtlest ethics issue may greatly

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