Confidentiality

One of the most important aspects of psychological management and treatment involves the issue of confidentiality. Healthcare practitioners are legally and ethically required to maintain the privacy and confidentiality of their patients. They cannot divulge any information about their patients to anyone (even the patient’s parents) without the patient’s written consent. Even then, the information is still restricted to what the patient agrees can be released, what is appropriate to be released, the conditions under which the information can be released and to whom. The only exceptions to the release of such information occur in cases involving imminent risk to the patient or others, child abuse, and a court order requesting the information. Confidentiality assures patients that their information will not be shared with anyone without their consent. The purpose of confidentiality is to promote a therapeutic atmosphere in which patients feel safe and secure enough to talk about anything related to their difficulties, regardless of how serious or personal.

Although confidentiality is viewed as the cornerstone of psychological treatment, it can feel like a stumbling block to people who want to know about the patient’s condition, treatment and progress. Most of the time, the people seeking this information are simply concerned for the patient’s welfare. Regardless of their motives, however, the information cannot be released by the practitioner without the patient’s written consent. Sometimes for a variety of reasons, the patient may not want others to know anything about his or her condition or treatment. Even if the patient consents, the practitioner still makes the decision whether it is appropriate or in the patient’s best interests to release the information. Obviously, this can be quite frustrating to someone who wants the information.

Some coaches have the benefit of having a departmental sport psychologist. Those coaches who have such a benefit, or who have an ongoing, working relationship with a psychologist or mental health professional, will likely know what to expect and how to proceed. Those who are working with a mental health professional for the first time are likely to have the most success by contacting the professional, introducing yourself, explaining that you understand and respect confidentiality issues, but would also like to be helpful to the student-athlete. Therefore, with everyone’s consent, you would simply like to know if the student-athlete is okay, if appointments are being kept, how treatment is progressing, whether the student-athlete should be training or competing, and what you might do to be helpful. This type of dialogue will not only be helpful with the existing case, but can facilitate the management of subsequent cases by laying the groundwork for a good relationship with the professional or agency.

Confidentiality does not have to be a problem, especially if it is handled properly from the beginning by healthcare professionals, both in terms of describing confidentiality to the patient and to those requesting information. In such circumstances, most patients are usually willing to consent to information release to significant others, especially if it pertains to general statements regarding condition and progress rather than specific information related to specific issues. Regardless, this release of information must always be voluntary by the patient. The patient should never be manipulated or coerced into giving permission.

Sometimes the concerned persons in the patient’s life may not be requesting information. Rather, they may want to provide the practitioner with information. Different practitioners handle this situation differently. Some may not want information. Even if they are willing to receive information, it may be difficult to do so because confidentiality precludes them from even acknowledging that they are treating the patient.

The Role of the Coach: Final Thoughts In this handbook, we have discussed why and how the coach should be involved in managing mental health issues that arise in their student-athletes. We have stressed that the coach’s role is not to be a therapist to affected student-athletes, but rather to “identify” and “refer.” This is not to say, however, that they should be uninvolved in the student-athlete’s treatment. Coaches have considerable power and influence with their student-athletes. That power and influence can be used by coaches to encourage and support treatment, which can have a positive effect on treatment outcome.

SUMMARY

1. The coach’s responsibility is to recognize and refer, not treat psychological problems such as depression, anxiety disorders, eating disorders or substance abuse disorders.

2. Approaching a student-athlete to discuss psychological issues requires good listening skills.

3. Referrals are most successful when made to a specific person.

4. Confidentiality is an essential aspect of psychological treatment.

Thompson, R.A., & Sherman, R.T. (n.d.). *NCAA Best Practices: Managing Student Athlete Mental Health Issues*. NCAA Sport Science Institute Mental Health Best Practices. Retrieves March 29, 2023 from https://www.ncaa.org/sports/2016/5/2/mental-health-best-practices.aspx