Group Therapy

written by Richard Leslie | May 24, 2016

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... I have previously written about this topic where I addressed the question of the confidentiality duties, if any, of the participants in group therapy. What I explore here is the situation where one of the participants in group therapy or counseling tells the practitioner something when they are not in the presence of the others (perhaps after the group session ends and the others have left) and expects confidentiality. In many of these cases, there has been no promise of confidentiality by the practitioner and there is no individual therapy or counseling taking place. Later, when relevant to the group therapy, the practitioner reveals that which was shared by the one group member. I have seen cases where the individual complains to the licensing board that the practitioner has violated his or her confidentiality.

It has been my view that in most of these matters, the therapist or counselor has done nothing wrong. The disclosures that are made to the group are typically made for the purposes of the treatment of the individuals in the group and for the group as a whole. The disclosures were not made to "third parties" – that is, to those who were not participants in the group counseling/therapy. Typically, no express promise of confidentiality is made. Even though the client may have expected confidentiality, this may not be reasonable under the circumstances. In most of these matters, the practitioner winds up not being disciplined by the licensing board. In a few cases, however, closure of the case does not come easily. As usual, the facts and circumstances vary from case to case, and thus the degree of vulnerability of the practitioner varies as well.

Therapists and counselors should be clear with members of the group concerning their role or relationship with the group and with each of the individuals in the group. It might be helpful to remind participants (if the practitioner so believes) that if they need to communicate with an individual therapist or counselor on a confidential basis, a referral can be made. Otherwise, members of the group should not expect confidentiality if there are merely casual or informal communications between the practitioner and one or more of the group participants outside the scheduled group session. Additionally, the practitioner must be careful not to promise confidentiality to one or more of the participants if it would interfere with the practitioner's primary duty to the group. This kind of discussion would best be had – and best be put in writing in the form of a disclosure statement (or some kind of "no secrets" policy) – prior to the commencement of group treatment.