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THE BOUNDARIES OF CLIENT CONFIDENTIALITY: A REFLECTION ON THE TARASOFF CASE AND PROFESSIONAL ETHICS IN PSYCHOLOGY

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Abstrak

Confidentiality is a fundamental principle in psychological practice that serves to maintain trust and the effectiveness of the therapeutic relationship between psychologists and clients. However, this principle is not absolute, as exceptions may arise under certain circumstances, particularly when serious risks to clients or third parties are involved. This article aims to examine narratively the boundaries of confidentiality in psychological practice by emphasizing an analysis of the case Tarasoff v. Regents of the University of California *and its implications for the principles of* duty to warn *and* duty to protect *within the context of modern practice. The method employed is a narrative review with thematic analysis of scholarly literature, books, and relevant professional ethical codes in psychology published between 2021 and 2024, including guidelines issued by the American Psychological Association. The findings indicate that confidentiality in psychology exists within a tension among major ethical principles such as autonomy, beneficence, and non-maleficence, while also being influenced by legal and technological developments. The Tarasoff case represents a significant turning point that shifted the paradigm from* client-centered confidentiality *toward* risk-managed ethics*. Furthermore, the study found that the implementation of* duty to warn *and* duty to protect *continues to demonstrate variations in interpretation across jurisdictions and has become increasingly complex within the context of digital psychological services. In conclusion, confidentiality in psychology is a dynamic and contextual ethical concept rather than an absolute one. Ethical decision-making regarding breaches of confidentiality requires multidimensional considerations encompassing clinical, legal, cultural,*

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and technological aspects. Therefore, strengthening ethical guidelines and conducting further empirical research are necessary to address the challenges of modern psychological practice.

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INTRODUCTION

Confidentiality is one of the fundamental principles in psychological practice and plays a crucial role in establishing the professional relationship between psychologists and clients. This principle ensures that all information disclosed by clients during assessment and intervention processes will remain confidential, enabling clients to feel secure in expressing themselves honestly and deeply. In various professional ethical codes, including those formulated by the American Psychological Association, confidentiality is regarded as a primary foundation for maintaining trust and integrity within the therapeutic relationship (American Psychological Association, 2017). Recent studies indicate that confidentiality directly influences clients' sense of safety, openness, and the quality of the therapeutic relationship between clients and mental health professionals (Rakhmaniar, 2023).

Nevertheless, confidentiality is not an absolute principle. Under certain circumstances, psychologists may face situations in which maintaining confidentiality could potentially result in harm, either to the client or to others. Recent literature emphasizes that this dilemma has become increasingly complex, particularly when the risk of harm involves third parties or the broader public (Kilbride, 2025). Situations such as threats of violence, suicide risk, or the potential for criminal acts require psychologists to balance the principles of non-maleficence and beneficence with their obligation to preserve confidentiality (Beauchamp & Childress, 2019).

This dilemma became increasingly evident following the emergence of the case Tarasoff v. Regents of the University of California, which marked a significant milestone in the development of professional ethics in psychology. The ruling in this case established the principles of duty to warn and duty to protect, affirming that mental health professionals have an obligation to protect individuals who may be at risk of becoming victims (Felthous, 2006; Tarasoff v. Regents of the University of California, 1976). More recently, discussions concerning the duty to warn have expanded into modern contexts such as social media and digital threats, further complicating the boundaries between privacy and public protection (MacIntyre et al., 2024).

Since then, the limits of confidentiality have remained a subject of ongoing debate. Contemporary studies demonstrate variations in the interpretation of when confidentiality may be breached, particularly across differing cultural, legal, and technological contexts (Wangmo et al., 2014; Weiser, 2002). Moreover, the emergence of digital psychology services has increasingly challenged the implementation of confidentiality principles in professional practice (Frieh, 2023).

Based on the background outlined above, several major issues constitute the focus of this study: how the concept of confidentiality is understood and implemented within psychological ethical codes; under what conditions confidentiality may or should be

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breached; how Tarasoff v. Regents of the University of California contributed to shaping the principles of duty to warn and duty to protect; and how these principles remain relevant in modern psychological practice. In line with these research questions, this article aims to comprehensively examine the literature concerning the boundaries of client confidentiality, analyze the ethical dilemmas arising from the Tarasoff case, and relate them to the implementation of psychological ethical codes within contemporary professional practice.

Critically, the hypothesis presented in this article positions confidentiality not as an absolute or neutral principle, but rather as a dynamic ethical construct that is vulnerable to negotiation among individual interests, professional responsibilities, and legal as well as social demands. Accordingly, breaches of confidentiality in psychological practice are assumed not merely to represent ethical exceptions, but also to reflect a paradigm shift from a model of client-centered confidentiality toward a model of risk-managed ethics, in which the protection of third parties may dominate clinical decision-making under certain conditions.

Furthermore, the Tarasoff case is viewed not only as a legal precedent, but also as a critical turning point that reconstructs the boundaries of psychologists' professional authority in determining ethical priorities. From this perspective, duty to warn and duty to protect are not entirely stable or universal concepts, but rather concepts that continue to be contested within the clinical ethics literature, particularly in response to developments in modern psychological practice, including telepsychology, digital communication, and the increasing complexity of social risks. Therefore, it is assumed that the relevance of these principles in contemporary practice has become increasingly problematic, as psychologists are required to make ethical decisions under conditions of uncertainty (ethical ambiguity), rather than merely adhering to established procedural standards.

LITERATURE REVIEW

The Concept of Confidentiality in Psychology

Confidentiality is a fundamental ethical principle in psychological practice that emphasizes the professional obligation to protect clients' personal information from disclosure to third parties without valid consent. Conceptually, confidentiality is understood as the expectation that information communicated within a professional context will not be disseminated without permission, except under certain conditions permitted ethically and legally. This principle is rooted in respect for individual privacy and autonomy and constitutes an essential component in establishing an effective and secure therapeutic relationship (American Psychological Association, 2017; Frieh, 2023).

In contemporary literature, confidentiality is viewed not only as a professional obligation but also as the primary foundation for the development of trust within the therapeutic relationship. This trust is a key factor that enables clients to disclose honestly their experiences, emotions, and psychological difficulties. Without assurance of confidentiality, clients are more likely to engage in self-disclosure inhibition, which may hinder the effectiveness of both psychological assessment and intervention. Recent studies demonstrate that confidentiality is directly correlated with the quality of the therapeutic alliance, which ultimately influences overall therapeutic outcomes (Levitt & Morrill, 2023; Pransiska et al., 2025).

Furthermore, confidentiality serves broader clinical and ethical functions by creating a safe space for psychological exploration without fear of judgment or external

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consequences. In this context, literature suggests that confidentiality is not merely procedural but also relational, as it forms the basis of psychological safety between clients and therapists (Levitt & Morrill, 2023). Consequently, breaches of confidentiality may have implications not only at the legal or administrative level but also in undermining the trust that lies at the core of the therapeutic process.

Within ethical frameworks, including those established by the American Psychological Association, confidentiality is positioned as a primary ethical standard that psychologists are obligated to maintain in professional practice. However, recent studies indicate that the implementation of this principle has become increasingly complex in modern contexts, particularly with the emergence of digital psychological services, telepsychology, and the growing exchange of information through technology. These developments create new challenges in maintaining the boundaries between private information and the risks of psychological data breaches (Aprilyani et al., 2023; Frieh, 2023).

Overall, the literature demonstrates that confidentiality in psychology is not a static concept but rather a dynamic ethical principle that continues to be negotiated among clinical needs, therapeutic relationships, and evolving socio-technological demands. Therefore, understanding confidentiality cannot be separated from the broader context of professional ethics, including the possibility of exceptions under certain circumstances involving the safety of individuals or others.

Exceptions to Confidentiality

Although confidentiality is a fundamental principle in psychological practice, contemporary literature emphasizes that it is not absolute and includes several ethically and legally regulated exceptions. These exceptions arise in response to situations in which the protection of individuals or society is considered a higher priority than maintaining client confidentiality. Generally, the three principal forms of exceptions discussed in the literature include threats to oneself or others, legal obligations, and mandatory reporting requirements, particularly in cases involving children and older adults.

One of the most significant exceptions to confidentiality occurs when there is a serious risk to the safety of the client or third parties. Under such circumstances, psychologists may be required to take preventive actions, including limited breaches of confidentiality. Literature indicates that decisions to disclose information in situations involving threats of violence or suicide risk constitute complex risk-assessment processes involving considerations of severity, specificity, and imminence of the threat (Bailey et al., 2025). Meta-analytic studies also reveal that many individuals experiencing suicidal ideation do not actively disclose their intentions to mental health professionals, thereby increasing the challenges associated with risk detection and the justification of interventions involving confidentiality breaches (Kleiman et al., 2020). These findings reinforce the argument that, in clinical practice, confidentiality must be dynamically negotiated when safety becomes the primary concern. Although such policies aim to prevent further harm, literature also highlights ethical tensions because mandatory interventions may reduce clients' trust in mental health professionals and potentially hinder the therapeutic process (Bailey et al., 2025; Vatnar et al., 2021).

The second exception relates to legal obligations, in which psychologists are required to disclose certain information based on applicable laws and regulations. In this context, confidentiality no longer remains solely within the domain of clinical judgment but becomes part of professional obligations regulated by legal systems. Systematic

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reviews indicate that many countries have adopted mandatory reporting approaches in specific cases, such as domestic violence or serious threats to public safety (Bailey et al., 2025; Vatnar et al., 2021).

The third and most common exception in psychological practice concerns mandatory reporting of abuse or neglect involving vulnerable populations, such as children and older adults. In many jurisdictions, mental health professionals are classified as mandatory reporters and are legally required to report suspected abuse even when such information is obtained within the confidential context of therapy (Bailey et al., 2025; Vatnar et al., 2021). Literature indicates that although these policies are designed to protect vulnerable groups, their implementation often creates ethical dilemmas, particularly when evidence is unclear or when reporting may damage the therapeutic relationship. In addition, studies highlight that professionals' understanding of the boundaries of mandatory reporting remains inconsistent, potentially affecting the consistency of policy implementation in practice (Thannhauser et al., 2022).

Overall, recent literature demonstrates that exceptions to confidentiality should not be understood as rigid rules but rather as outcomes of contextual ethical considerations. These three forms of exceptions—threats of harm, legal obligations, and mandatory reporting of abuse—reflect a paradigm shift from absolute confidentiality toward a model of risk-based ethical decision-making. Within this framework, psychologists are required to balance their obligation to maintain clients' trust with their broader social responsibility to prevent greater harm.

The Tarasoff Case

The case of Tarasoff v. Regents of the University of California is regarded as one of the most significant precedents in the history of ethics and law in clinical psychology, fundamentally transforming the understanding of the boundaries of confidentiality in professional practice. The case originated from a client who disclosed to his therapist an intention to commit violence against a specific individual; however, the information was not communicated either to the potential victim or to the relevant authorities. As a result, the threat was ultimately carried out, leading to the victim's death and subsequently triggering legal action against both the institution and the professionals involved in the case. In its final ruling, the court affirmed that under certain circumstances, the duty to protect the public may supersede the obligation to maintain client confidentiality (Pizzimenti, 1989; Tarasoff v. Regents of the University of California, 1976).

Conceptually, the Tarasoff case marked a critical turning point in the ethical paradigm of psychology, shifting from a client-centered confidentiality approach toward a more risk-managed ethics framework. Within the traditional paradigm, confidentiality was regarded as an absolute obligation that could not be breached except under extremely limited conditions. Following the Tarasoff ruling, however, the view emerged that the protection of third parties and the public interest could ethically justify overriding confidentiality in certain situations (Felthous, 2006; Verity et al., 2002).

This shift created significant ethical conflicts within psychological practice, particularly between the principle of maintaining client trust and the obligation to prevent harm. Contemporary literature frequently describes this conflict as a tension between a trust-based therapeutic alliance and a risk prevention framework. On the one hand, confidentiality is considered a crucial element in fostering client openness; on the other hand, failure to act in situations involving serious threats may result in severe legal and moral consequences for practitioners (Burgess et al., 2022; Pizzimenti, 1989).

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The Tarasoff case also gave rise to the concepts of duty to warn and duty to protect, referring to the professional obligation to take certain actions to protect individuals who may become victims of threats disclosed by clients. In the development of modern law and clinical practice, these concepts are no longer interpreted uniformly but instead vary across jurisdictions, both in terms of the actions required and the risk thresholds used to determine intervention (Burgess et al., 2022; Verity et al., 2002). Some legal systems emphasize the obligation to warn potential victims directly, whereas others focus more on indirect protective measures such as reporting to authorities or increasing the intensity of clinical monitoring.

Furthermore, recent literature indicates that implementing the duty to warn in modern practice is not always straightforward, as it frequently occupies an ethical gray zone. Psychologists must assess the credibility of threats, the level of risk involved, and the potential impact on the therapeutic relationship before deciding to breach confidentiality. In addition, developments in communication technology and the increasing prevalence of threats expressed through digital platforms have further expanded the complexity of applying these principles in contemporary contexts (Felthous, 2006; Pizzimenti, 1989).

Overall, the Tarasoff case not only serves as the legal foundation for the duty to warn, but also functions as an ethical point of reflection that continues to be debated within modern psychological literature. The paradigm resulting from this case demonstrates that confidentiality in psychological practice is not an absolute principle, but rather one that constantly exists in tension among client protection, professional responsibility, and the public interest.

Ethical Tensions and Variations in Interpretation within Psychological Practice

In clinical psychological practice, ethical dilemmas related to confidentiality frequently emerge in the form of tensions between competing ethical principles. One of the primary tensions exists between client autonomy and beneficence. The principle of autonomy emphasizes an individual's right to determine the management of their personal information, including decisions regarding the disclosure or concealment of psychological conditions. However, in certain situations, psychologists are required to consider interventions that may conflict with the client's wishes in the interest of greater safety or well-being. Ethical literature suggests that, in practice, autonomy rarely stands alone; rather, it is often negotiated alongside the principle of beneficence when significant clinical risks are present (Pellegrino & Thomasma, 1987).

In addition, tensions also arise between confidentiality and non-maleficence. Confidentiality obligates psychologists to maintain the privacy of client information, whereas non-maleficence requires psychologists to prevent harm to clients as well as third parties. Recent literature characterizes this conflict as the core of modern clinical ethical dilemmas, particularly in cases involving risks of violence, suicide, or threats toward others (Bailey et al., 2025; Kilbride, 2025). Studies further indicate that decisions to breach confidentiality are rarely black-and-white; instead, they exist along a spectrum of complex risk considerations in which psychologists must evaluate the urgency of threats and the potential consequences of either action or inaction (Kleiman et al., 2020).

Furthermore, contemporary literature demonstrates that these ethical tensions have become increasingly complex with the development of digital psychological practice, which extends ethical decision-making into virtual environments. In such contexts, the boundary between client protection and harm prevention becomes

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increasingly blurred, particularly when information is communicated through digital media that are rapid and difficult to control (Frieh, 2023). This indicates that ethical dilemmas are not merely theoretical in nature but are increasingly intertwined with technological developments in mental health services.

Beyond tensions among ethical principles, the literature also reveals variations in interpretation across countries regarding the implementation of confidentiality and the obligations associated with breaching it. These differences are primarily influenced by legal systems, ethical cultures, and the regulatory structures governing the psychology profession within each country. In certain jurisdictions, such as the United States, the principle of duty to warn is more explicit and may be mandatory under specific circumstances, whereas in countries such as the United Kingdom or France, the approach tends to be more flexible or based on clinical discretion (discretionary approach) (Felthous et al., 2008).

Comparative studies demonstrate that these variations create significant differences in how psychologists make ethical decisions, particularly in determining whether a threat is sufficiently serious to justify breaching confidentiality (Felthous et al., 2008; Verity et al., 2002). In some cases, the absence of uniform standards creates professional uncertainty, which may ultimately affect the consistency of ethical practice in the field.

Thus, contemporary literature emphasizes that tensions among ethical principles such as autonomy, beneficence, non-maleficence, and confidentiality cannot be resolved universally. Rather, ethical decision-making in psychological practice must be understood as a contextual process influenced by legal frameworks, cultural considerations, and continuously evolving technological developments.

Relevance in Modern Psychological Practice

In modern psychological practice, issues concerning confidentiality and the obligation to protect third parties through the principles of duty to warn and duty to protect have become increasingly complex and can no longer be understood as absolute rules. The question of whether all psychologists are required to issue warnings when threats are present remains a subject of ongoing debate within the clinical ethics literature. In general, contemporary scholarship suggests that such obligations are not always universal, but instead depend on risk assessment, legal context, and professional standards within particular jurisdictions (Felthous et al., 2008). Consequently, the decision to breach confidentiality remains within the realm of professional discretion and requires highly careful ethical consideration.

Within the context of modern practice, one of the greatest challenges is the expansion of digital mental health services, including telecounseling and telepsychology. This transformation has significant implications for data security, communication privacy, and the potential leakage of client information. Systematic literature indicates that although telepsychology improves access to services, it also increases the risk of confidentiality breaches due to the use of electronic systems, insecure networks, and limited control over clients' environments during sessions (Setyasri et al., 2025). Moreover, other studies emphasize that issues of security, privacy, and confidentiality have become major challenges in implementing digital mental health services, particularly following the rapid increase in online services after the pandemic (Keenan et al., 2022).

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Furthermore, studies on telehealth demonstrate that privacy violations may occur not only within digital systems but also within the physical contexts of service users, such as home environments that are not fully private or the shared use of electronic devices. This expands the traditional definition of confidentiality from merely a professional obligation into a multidimensional issue encompassing technological, environmental, and user-behavioral aspects (Setyasri et al., 2025). Consequently, psychologists are required not only to understand classical clinical ethics but also to possess digital literacy and information security competencies as integral components of modern professional practice.

From legal and professional perspectives, the implications of the duty to warn in modern practice also reveal tensions between public protection and the preservation of client confidentiality. Literature demonstrates that not all jurisdictions apply identical standards, resulting in uncertainty among psychologists regarding when the obligation to breach confidentiality genuinely applies (Felthous et al., 2008). In addition, developments in contemporary ethical discourse indicate that the boundary between moral obligation and legal obligation has become increasingly blurred, particularly in cases involving indirect or digitally mediated threats.

Overall, contemporary literature demonstrates that the relevance of the duty to warn principle in modern psychological practice continues to increase while simultaneously becoming more problematic. Psychologists are required not only to maintain a balance between confidentiality and protection but also to adapt to technological changes, the complexity of social risks, and variations in cross-national regulations. Thus, ethical decision-making in modern practice is no longer merely procedural in nature but instead requires contextual and multidisciplinary critical judgment.

METHOD

This study employed a qualitative approach using a narrative review design to examine literature concerning the boundaries of confidentiality in psychological practice, particularly in relation to the case Tarasoff v. Regents of the University of California and the principles of duty to warn and duty to protect.

Data sources were obtained from scholarly journal articles, books, and professional ethical code documents, including those published by the American Psychological Association. The literature reviewed focused on publications from 2021–2024 relevant to issues of confidentiality in modern psychology.

The literature collection process was conducted through academic databases such as Google Scholar, PubMed, and ScienceDirect using keywords related to confidentiality, psychological ethics, and the Tarasoff case. The collected data were analyzed using a thematic analysis approach by categorizing findings into major themes, including the concept of confidentiality, exceptions to confidentiality, and ethical implications in modern practice.

RESULTS AND DISCUSSION

Results

The findings of the literature review indicate that confidentiality in psychological practice is understood as a fundamental ethical principle aimed at maintaining client trust and the effectiveness of the therapeutic relationship. However, the findings also suggest that this principle is not absolute but instead has boundaries regulated by ethical and legal

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considerations. Across recent literature, a consensus was identified that breaches of confidentiality may be justified under certain circumstances, particularly when serious risks to clients or third parties are involved (Bailey et al., 2025; Kilbride, 2025).

The review of Tarasoff v. Regents of the University of California demonstrates that this case constituted a major turning point in the transformation of ethical paradigms in psychology, shifting from a confidentiality approach primarily protective of clients toward one that increasingly considers public safety. Across the studies analyzed, the case was found to have directly established the principles of duty to warn and duty to protect, which continue to demonstrate variations in interpretation across jurisdictions and professional institutions (Felthous et al., 2008; Verity et al., 2002).

In addition, the findings reveal a consistent ethical tension between the principle of confidentiality and the principles of non-maleficence and beneficence. In many studies, this conflict is described as a central dilemma faced by psychologists when determining whether a particular threat is sufficiently serious to justify breaching confidentiality (Kleiman et al., 2020). The findings further indicate that in modern practice, particularly in digitally based services, the complexity of ethical decision-making has increased due to technological and online communication factors (Frieh, 2023).

Discussion

The findings of this study affirm that confidentiality in psychology cannot be understood as an absolute principle, but rather as a contextual and dynamic ethical concept. Within the framework of professional ethics established by the American Psychological Association, confidentiality remains a primary foundation of the therapeutic relationship; however, it may be overridden under certain circumstances involving serious risks (American Psychological Association, 2017). The Tarasoff case demonstrates that ethical paradigm shifts are not merely theoretical but are also shaped by the necessity of responding to real risks in clinical practice. The principle of duty to warn emerging from the case reflects a transition from a client-centered ethics model toward a risk-based ethics framework, in which the protection of third parties becomes a significant consideration in professional decision-making (Felthous, 2006; Verity et al., 2002).

Nevertheless, the literature also demonstrates that the implementation of this principle is not uniform. Differences in legal systems and cultural contexts create variations in the interpretation and application of the duty to warn across countries (Felthous et al., 2008). This creates challenges for psychologists in determining appropriate ethical boundaries, particularly when dealing with situations situated within ethical ambiguity.

Moreover, the development of modern digital psychological services has expanded the complexity of these ethical dilemmas. Increasingly open communication technologies heighten the risk of information leakage while simultaneously accelerating the spread of potential threats, thereby requiring psychologists to possess additional competencies in digital literacy and risk-based ethical decision-making (Frieh, 2023; Setyasri et al., 2025). Overall, these findings and discussions demonstrate that the Tarasoff case not only serves as a legal foundation for the obligation to protect third parties but also symbolizes a major transformation in modern psychological ethics. This transformation emphasizes that confidentiality practices must continually be negotiated alongside other ethical principles and adapted to evolving social, legal, and technological contexts.

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SYNTHESIS

The synthesis of the literature demonstrates that confidentiality in psychology cannot be understood as a singular and stable concept; rather, it represents the outcome of ongoing theoretical and practical debates. Broadly speaking, two major tendencies emerge within the literature. The first perspective emphasizes absolute confidentiality as the primary foundation of the therapeutic alliance, arguing that client trust can only be established when disclosed information is fully protected. This perspective is commonly found in classical clinical ethics literature and is reinforced by the view that breaches of confidentiality, even when intended for protective purposes, may significantly damage the therapeutic relationship and reduce the effectiveness of psychological interventions (American Psychological Association, 2017; Levitt & Morrill, 2023).

In contrast, the second perspective emphasizes a risk-based ethical approach, which views confidentiality as a conditional principle rather than an absolute one. From this standpoint, the protection of clients cannot be separated from moral responsibility toward third parties who may be affected by the client's actions. This perspective has been strengthened by legal and ethical developments following the case of Tarasoff v. Regents of the University of California, which significantly shifted ethical orientation from individual protection toward balancing the interests of individuals and society (Felthous, 2006; Verity et al., 2002).

Differences in perspective are also evident in the interpretation of the principles of duty to warn and duty to protect. Some scholars regard these principles as clear ethical obligations that must be implemented whenever a credible threat exists. However, other literature suggests that their implementation is highly dependent on clinical context, level of risk, and legal regulations within specific jurisdictions, making universal application impossible (Felthous et al., 2008). Consequently, substantial variations in professional practice exist across countries and institutions.

Furthermore, differing perspectives also emerge regarding the impact of breaching confidentiality on the therapeutic relationship. Some studies suggest that breaches of confidentiality may permanently damage client trust, whereas others argue that transparency in ethical decision-making may actually strengthen trust when conducted through appropriate communication and grounded in concerns for safety (Bailey et al., 2025; Kilbride, 2025).

From these differing viewpoints, it can be concluded that contemporary literature no longer positions confidentiality as a dichotomous principle (either maintained or violated), but rather as a spectrum of contextual ethical decision-making. Within this spectrum, psychologists are required to balance four primary elements: therapeutic trust, client protection, third-party safety, and legal-professional obligations. Therefore, the literature synthesis indicates that confidentiality ethics in modern psychology is moving toward a reflective-contextual model, in which ethical decisions are not universal but must instead be negotiated according to clinical situations, cultural considerations, and technological developments.

CONCLUSION

This review demonstrates that confidentiality in psychological practice is a fundamental ethical principle that serves as the foundation of trust within the therapeutic relationship; however, it is not absolute. Analysis of the literature and the case of Tarasoff v. Regents of the University of California confirms that there are circumstances in which confidentiality may—and in some cases must—be breached, particularly when serious

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risks to clients or third parties are present. The Tarasoff case represents a critical turning point that shifted the ethical paradigm in psychology from a client-centered confidentiality approach toward a risk-managed ethics framework, as reflected in the principles of duty to warn and duty to protect.

Nevertheless, the implementation of these principles in modern practice continues to demonstrate significant variations in interpretation across legal, cultural, and professional contexts. Therefore, ethical decision-making regarding confidentiality should be understood as a contextual and dynamic process that cannot be separated from risk considerations and ongoing socio-technological developments.

Based on the literature synthesis, several research gaps remain to be addressed. First, most existing studies continue to focus primarily on legal and normative ethical aspects, while empirical research examining how psychologists actually make decisions in situations involving confidentiality dilemmas remains limited. Second, literature concerning the implementation of duty to warn within digital contexts is still underdeveloped, particularly regarding how threats communicated through social media or online platforms should be evaluated within professional ethical frameworks. Third, there remains a lack of cross-cultural and cross-national consensus regarding operational standards for breaching confidentiality, resulting in substantial interpretative variation that has not been sufficiently explored through comparative studies. This highlights the need for more global and integrative research on confidentiality ethics in contemporary psychological practice.

Based on these findings and research gaps, several recommendations can be proposed. First, stronger professional ethics training is needed for psychologists, particularly in the area of risk-based ethical decision-making, in order to help practitioners respond to confidentiality dilemmas in a more adaptive and contextual manner. Second, professional psychological organizations, including the American Psychological Association and psychological associations in various countries, should update ethical guidelines to become more responsive to the challenges of the digital era, particularly concerning tele-psychology and client data security. Third, future research is encouraged to adopt empirical and cross-cultural approaches to explore how psychologists in different contexts make decisions regarding breaches of confidentiality. Such efforts are essential for developing ethical standards that are more globally harmonized and practically applicable.

BIBLIOGRAPHY

American Psychological Association. (2017). *Anxiety*. http://www.apa.org/topics/anxiety/

Aprilyani, R., Fahlevi, R., Nurlina, N., Wulandari, R., Nurhidayatullah, N., & Pranajaya, S. A. (2023). *Psikologi perkembangan peserta didik*. Get Press Indonesia.

Bailey, R. P., Samsudin, N., Ries, F., & Fernandez, J. A. (2025). Physical activity interventions for adolescent suicide ideation and behavior: a rapid review. *International Journal of Public Health*, *14*(3), 1221–1231.

Beauchamp, T., & Childress, J. (2019). Principles of biomedical ethics: marking its fortieth anniversary. In *The American Journal of Bioethics* (Vol. 19, Issue 11, pp. 9–12). Taylor & Francis.

Burgess, B., Ginsberg, A., Felten, E. W., & Cohney, S. (2022). Watching the watchers:

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bias and vulnerability in remote proctoring software. *31st USENIX Security Symposium (USENIX Security 22)*, 571–588.

Felthous, A. R. (2006). Warning a potential victim of a person's dangerousness: clinician's duty or victim's right? *Journal of the American Academy of Psychiatry and the Law Online*, *34*(3), 338–348.

Felthous, A. R., O'Shaughnessy, R., Kuten, J., François-Pursell, I., & Medrano, J. (2008). The clinician's duty to warn or protect: in the United States, England, Canada, New Zealand, France and Spain. *The International Handbook of Psychopathic Disorders and the Law: Laws and Policies*, *2*, 75–94.

Frieh, E. C. (2023). *In the System but Not of the System: Understanding the Role and Experiences of Mental Health Peer Specialists*. Indiana University.

Keenan, A. J., Tsourtos, G., & Tieman, J. (2022). Promise and peril-defining ethical telehealth practice from the clinician and patient perspective: A qualitative study. *Digital Health*, *8*, 20552076211070390.

Kilbride, M. K. (2025). Breaching confidentiality in genetic and non-genetic cases: Two problematic distinctions. *The American Journal of Bioethics*, *25*(10), 9–21.

Kleiman, E. M., Yeager, A. L., Grove, J. L., Kellerman, J. K., & Kim, J. S. (2020). Real-time mental health impact of the COVID-19 pandemic on college students: ecological momentary assessment study. *JMIR Mental Health*, *7*(12), e24815.

Levitt, H. M., & Morrill, Z. (2023). Silences in psychotherapy: An integrative meta-analytic research review. *Psychotherapy*, *60*(3), 320.

MacIntyre, M. R., Sones, A. C., Li, J., Darby, W. C., & Weinstock, R. (2024). From posts to protection: Ethical considerations regarding forensic psychiatrists and a duty to warn based on social media. *Behavioral Sciences & the Law*, *42*(2), 130–148.

Pellegrino, E. D., & Thomasma, D. C. (1987). The conflict between autonomy and beneficence in medical ethics: proposal for a resolution. *J. Contemp. Health L. & Pol'y*, *3*, 23.

Pizzimenti, L. A. (1989). The Lawyer's Duty to Warn Clients About Limits on Confidentiality. *Cath. UL Rev.*, *39*, 441.

Pransiska, H., Anrial, A., & Valentine, F. (2025). *Komunikasi Terapeutik Hipnoterapi dalam Meningkatkan Percaya Diri Klien di Rumah Psikologi Excellent*. Institut Agama Islam Negeri (IAIN) Curup.

Rakhmaniar, A. (2023). Komunikasi Terapeutik Pada Pasien Dengan Gangguan Mental: Studi Kualitatif Pada Psikoterapis. *TUTURAN: Jurnal Ilmu Komunikasi, Sosial Dan Humaniora*, *1*(2), 292–306.

Setyasri, A. S., Putri, G. A., & Malik, C. (2025). Praktik Telekonseling Berbasis Teknologi Digital: Studi Kualitatif Layanan Kesehatan Mental di Indonesia. *Muthmainnah: Jurnal Bimbingan Konseling Islam Dan Psikosufistik*, *1*(1), 54–64.

Tarasoff v. Regents of the University of California (1976).

Thannhauser, R. E., Morris, Z. A., & Gamble, N. (2022). Informed consent, confidentiality, and practitioner disclosure in therapeutic work with youth: A systematic review of practitioners' perspectives. *Adolescent Research Review*, *7*(3),

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355–382.

Vatnar, S. K. B., Leer-Salvesen, K., & Bjørkly, S. (2021). Mandatory reporting of intimate partner violence: a mixed methods systematic review. *Trauma, Violence, & Abuse*, *22*(4), 635–655.

Verity, C., Manning, D., & Nicoll, A. (2002). Consent, confidentiality, and the threat to public health surveillanceCommentary: Don't waive consent lightly—involve the public. *BMJ*, *324*(7347), 1210–1213.

Wangmo, T., Handtke, V., & Elger, B. S. (2014). Disclosure of past crimes: an analysis of mental health professionals' attitudes towards breaching confidentiality. *Journal of Bioethical Inquiry*, *11*(3), 347–358.

Weiser, J. (2002). Measure of Damages for Violation of Property Rules: Breach of Confidentiality. *U. Chi. L. Sch. Roundtable*, *9*, 75.

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