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# **Confidentiality and Communication: Navigating Client Privilege**

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#### ABSTRACT

Client privilege and confidentiality are foundational to professional-client relationships, ensuring trust and candid communication. While legal frameworks, such as attorney-client privilege and psychotherapist confidentiality, codify these protections, they are also upheld by ethical standards across professions. This paper examines the evolution of client privilege, its legal and ethical dimensions, effective communication strategies, and the challenges professionals face in maintaining confidentiality. Addressing the nuances of privilege and confidentiality, the discussion highlights the importance of trust, transparency, and active listening in fostering strong client relationships while emphasizing the potential risks posed by breaches, technological developments, and competing obligations. Recommendations for training, adherence to best practices, and the ethical balancing of competing responsibilities are also examined.

**Keywords:** Client privilege, confidentiality, professional ethics, communication strategies, trust, legal frameworks, therapeutic confidentiality.

#### INTRODUCTION

Client privilege and confidentiality are hallmarks of many professional-client relationships, and professionals of various types make every effort to protect information disclosed by their clients. The legal definition of privilege is a designation not every jurisdiction confers on the professional-client relationship that is generally a designate communications between a professional and client as shielded from disclosure; communications with third parties usually are not. Outside the law, the concept of confidentiality is much more broadly operative. Psychotherapists must maintain patient confidentiality; doctors are also legally required to keep private what their patients tell them. Despite the rules surrounding all of the above contexts, professionals sometimes do disclose otherwise confidential information. At least in the U.S., most lovesickness torts result from a professional's breach of some duty to maintain confidentiality or protect privacy [1, 2]. The secular version of the same rule states that some professional communications are privileged by a client's belief that these professionals are so entrusted, and as such, protected from disclosure. The recognition of this factor, often of superhuman or religious faith, and why this should be privileged or protected, would seem to go a long way toward making it understandable as to how both lawyers and psychotherapists would have similar theoretical protection. One might posit that if the target of the inquiry were part of marriage counseling or medical revelations of any sort, these might be seen as evidencing the same type of confidentiality and trust as would exist between a priest and a penitent [3, 4]. In the field of law as a profession, the concept of confidentiality gradually developed from the theories presented in handbooks on English canon law. One of the parallel doctrines of secret or privileged communication developed in philosophical theories was related to those of the priest-penitent privilege and the psychiatrist-patient privilege. Central to the overall development of the various doctrinal privileges was the concept of the right of privacy or the reasonable expectation of confidentiality. The underlying premise is that to build a relationship of trust necessary for meaningful counseling to occur, the client must be assured that the information exchanged in that relationship will

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not be disclosed. Without these assurances, a client will self-censor or disassemble, thereby disqualifying or misleading the counselor [5, 6].

## Legal Foundations of Client Privilege

The protection of client privilege is supported by strong legal frameworks in many jurisdictions. Different forms of privilege are regulated by different legislative provisions. In the UK, privilege is a common law duty that can be found in various cases. There is a public interest in encouraging the provision of confidential counseling or support, thereby promoting access to professional support or therapeutic services. Knowing that communications will be treated as confidential assures the client that the counselor or other professional will not disclose information relating to their identifiable client without having been authorized to do so or having provided notice to the client. The presence of several protections for the client in the regulations implies that the expectation of confidence in the therapeutic confessional relationship continues to be worthy of consolidation [7, 8]. The Human Rights Act also played an important part in the development of a person's right to confidentiality. In particular, confidentiality in the legal context is protected by a legal construct known as legal professional privilege, a term used to denote two distinct protections conferred in legal advice. It can be a risk assessment and confidence that encourages clients to speak. In psychotherapy, the principle of confidentiality is thought of as the therapeutic contract. In comparison, attorney-client privilege is the right of a client to have attorney-client communications kept private [9, 10].

### **Ethical Considerations in Maintaining Client Confidentiality**

Ethically, when a client receives therapy, they voluntarily share intimate and often painful details about their lives. These clients assume that the information relayed to the clinician will be kept private and not disclosed to others. To clients, it is the right to confidentiality imbued within the professional-patient relationship. Professionals may claim that confidentiality is grounded in their moral duty to protect their clients and respect their autonomy, privacy, and trust. Standards of conduct indicate professional behavior that is both expected and required. As an ethic of patient confidentiality exists alongside professional codes of conduct, it is seen as an indispensable element of ethical practice [11, 12]. Ethical considerations, too, form the foundational points of legal discourse, such as those involved in licenses and statutes. Indeed, standards of professional bodies require that the practice of disclosure must be underscored by informed consent from the patient. To breach confidentiality without the consent of the patient is frequently understood as ethically and professionally inappropriate. Moral scholars concede that in a given situation, professionals may functionally owe greater loyalty to the legal system than to the client; in this way, some legal findings and ethical guidelines offer a primary stimulus to request the violation of a client's right to confidentiality. However, it is agreed that such a stance is appropriate only when the communication in question is integral to an individual or the public [13, 14].

## **Effective Communication Strategies with Clients**

Effective communication is essential for navigating interactions and relationships with clients. Professionals who seek to build trust and rapport must carefully consider how they communicate in interactions. More caring and empathetic communication from professionals is viewed positively by clients. For professionals in positions where information and disclosures must be made, it is essential to be particularly clear and transparent in communication. Active listening, empathetic responses, and transparent discussion of confidentiality parameters can work together to effectively communicate and maintain client privilege [15, 16]. Understanding effective communication techniques can enhance communication with clients. It is extremely important to be a good active listener. Active listening techniques include direct eye contact while listening, providing focused attention, and showing the client that you are understanding or thinking about what they are saying. Another important aspect of communication is using reflective and empathetic language when speaking. This type of language demonstrates to the client that you are attempting to see items from their perspective and validates their experience. Your non-verbal cues are another important aspect that should be monitored while communicating. Extremes such as overly casual or overly distant body language can both lead to misunderstandings. Confidentiality limits should always be established in the first session [17, 18]. In your first session with a new client, you must clarify the confidential and non-confidential nature of your work. This will never be a tricky conversation for you or your client if you have already mastered the skill of transparency. The biggest thing to remember when discussing confidentiality is to guide the conversation in a way that puts the client at ease and helps them want to be open and honest with you. Talking about confidentiality is especially important if clients have misperceptions about your role and

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what you are supposed to report. After the parameters of your relationship have been discussed, the client should walk away knowing what information will be kept confidential and what information concerning their health-related conditions and behaviors may be shared outside of the office. If a proper explanation is provided in a language that the client can understand, and the client gives consent, then you have established privilege [19, 20].

## Challenges and Pitfalls in Maintaining Client Privilege

Through our interactions with adversaries, whistleblowers, and victims/survivors, professionals are often called upon to maintain client privilege. Despite every effort, breaches often occur due to a variety of factors. In our experience, breaches may be inadvertent or due to negligence, ignorance, competing demands in the service of the client, intervention of others, or simply succumbing to the pressure of being asked to release information. Clients and their advocates who have shared their experiences and personal information can suffer substantial penalties if they continue to make requests for information exchange with workers who are legally compelled to decline. Many situations place professionals under external pressures where competing rights, responsibilities, or even the ethical standards of a profession may challenge the ability to maintain client privilege. Rapid development in technology and social media has attracted considerable attention to the fortification against breaches of confidentiality, and it is common practice to highlight the limitations during initial consultations. Essential in the establishment of principles is a general caution to other workers about discussing cases while honoring confidentiality \( \gamma 21, \) 22]. Training in confidentiality and the understanding of client privilege are key parts of standard protocols. Moreover, the educational development of professionals in these matters should be done in safe environments where concerns can be discussed without fear of rebuke. Best-practice recommendations dictate consistency in the professional sophistication of principles and practice, and the standards required may likely be administrative, professional, and legal. Researchers argue in agreement with these findings, showing that failure to protect client information has historically and continues to result in breaches within these communities. It was explained how early privacy awareness legislation aimed to ensure that information systems are governed by the principle that the information an individual provides in interaction with the system will not be used for secondary purposes while also discussing some of the long-lasting complications of the same. Findings on the consequences of poor secondary victimization management draw on prevailing theories related to the various issues of confidentiality [23, 24].

#### **CONCLUSION**

Client privilege and confidentiality serve as the bedrock of trust within professional-client relationships, ensuring open communication and effective service delivery. Legal protections, such as attorney-client privilege, and ethical standards, including psychotherapist confidentiality, reinforce these principles. However, maintaining this trust is not without challenges. Advances in technology, competing legal and ethical obligations, and the potential for breaches necessitate ongoing vigilance. Professionals must prioritize clear communication, transparency, and continuous education to navigate these complexities effectively. By fostering an environment of trust and adhering to both ethical and legal standards, professionals can uphold the sanctity of confidentiality, enhancing the integrity and efficacy of their practice.

# REFERENCES

- Martins EC. The Characteristics Of 'Being A Good Professional 'In the Intricacies of The Ethics
  of The Profession and Conduct Professional Ethics (Study with Professionals and .... Social
  Science and Humanities Journal (SSHJ). 2024. <a href="mailto:sshjournal.com">sshjournal.com</a>
- 2. Singh A. Efficacy of Ethical Values and Its Subsequent Dilemmas: an Analysis of Legal Learning and Praxis Through Jurisprudence. Available at SSRN 4770962. 2024 Mar 24.
- 3. Ellis C, Jacobs M, Kendall D. The impact of racism, power, privilege, and positionality on communication sciences and disorders research: Time to reconceptualize and seek a pathway to equity. American Journal of Speech-Language Pathology. 2021 Sep 23;30(5):2032-9. [HTML]
- 4. Anderson SK, Handelsman MM. Positive ethics for mental health professionals: A proactive approach. John Wiley & Sons; 2021 Aug 2.
- 5. Krafft M, Kumar V, Harmeling C, Singh S, Zhu T, Chen J, Duncan T, Fortin W, Rosa E. Insight is power: Understanding the terms of the consumer-firm data exchange. Journal of Retailing. 2021 Mar 1;97(1):133-49. sciencedirect.com

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#### https://rijournals.com/current-issues-in-arts-and-management/

- 6. Alzaidi, Maram Saeed, and Gomaa Agag. "The role of trust and privacy concerns in using social media for e-retail services: The moderating role of COVID-19." *Journal of Retailing and Consumer Services* 68 (2022): 103042.
- 7. Williamson SM, Prybutok V. Balancing privacy and progress: a review of privacy challenges, systemic oversight, and patient perceptions in AI-driven healthcare. Applied Sciences. 2024 Jan 12;14(2):675.
- 8. Phillips A, Bronselaer T, Borry P, Van Hoyweghen I, Vears DF, Pasquier L, Callens S. Informing relatives of their genetic risk: an examination of the Belgian legal context. European Journal of Human Genetics. 2022 Jul;30(7):766-71. nih.gov
- 9. Tegegne MD, Melaku MS, Shimie AW, Hunegnaw DD, Legese MG, Ejigu TA, Mengestie ND, Zemene W, Zeleke T, Chanie AF. Health professionals' knowledge and attitude towards patient confidentiality and associated factors in a resource-limited setting: a cross-sectional study. BMC medical ethics. 2022 Mar 14;23(1):26. <a href="mailto:springer.com">springer.com</a>
- 10. Calzada I. Citizens' data privacy in china: The state of the art of the personal information protection law (pipl). Smart Cities. 2022 Sep 8;5(3):1129-50.
- 11. Janke N, Coe JB, Bernardo TM, Dewey CE, Stone EA. Pet owners' and veterinarians' perceptions of information exchange and clinical decision-making in companion animal practice. PLoS One. 2021 Feb 1;16(2):e0245632.
- 12. Pilecki B, Luoma JB, Bathje GJ, Rhea J, Narloch VF. Ethical and legal issues in psychedelic harm reduction and integration therapy. Harm Reduction Journal. 2021 Apr 7;18(1):40. springer.com
- 13. Bommu R. Ethical Considerations in the Development and Deployment of AI-powered Medical Device Software: Balancing Innovation with Patient Welfare. Journal of Innovative Technologies. 2022 May 16;5(1):1-7.
- 14. Costanza-Chock S, Raji ID, Buolamwini J. Who Audits the Auditors? Recommendations from a field scan of the algorithmic auditing ecosystem. InProceedings of the 2022 ACM Conference on Fairness, Accountability, and Transparency 2022 Jun 21 (pp. 1571-1583). [PDF]
- 15. Pereira RA, Sousa Valente Ribeiro PC. Ways and means to comfort people at the end of life: how is the nurse a privileged player in this process? Palliative care and social practice. 2023 Jul;17:26323524231182730.
- 16. Glass VQ, Bickler A. Cultivating the therapeutic alliance in a telemental health setting. Contemporary Family Therapy. 2021 Jun;43(2):189-98.
- 17. Zhang Z, Jia M, Lee HP, Yao B, Das S, Lerner A, Wang D, Li T. "It'sa Fair Game", or Is It? Examining How Users Navigate Disclosure Risks and Benefits When Using LLM-Based Conversational Agents. InProceedings of the CHI Conference on Human Factors in Computing Systems, CHI 2024, Honolulu, HI, USA, May 11-16, 2024 2024 (pp. 156-1). ACM. sauvikdas.com
- 18. Sadhukhan D, Ray S, Obaidat MS, Dasgupta M. A secure and privacy preserving lightweight authentication scheme for smart-grid communication using elliptic curve cryptography. Journal of Systems Architecture. 2021 Mar 1;114:101938. <a href="https://example.com/journal-grid-communication-grid-curve-cryptography">https://example.com/journal-grid-curve-cryptography</a>. <a href="https://example.com/journal-grid-curve-cryptography">Journal-grid-curve-cryptography</a>. <a href="https://example.com/journal-grid-curve-
- 19. Okyay EK, Bal Z, Barut S, Güney E. Components of obstetric violence: A descriptive study on physical abuse, non-consented care and non-confidential care. Journal of Clinical Medicine of Kazakhstan. 2022;19(4):32-9. cyberleninka.ru
- 20. Beersma B, Martinescu E, Testori M, Dores Cruz T, Nieper A. The Importance of Conceptual Clarity and Methodological Diversity for Studying Confidential Gossip—a Response and Addition to Fan et al.(2021). Collabra: Psychology. 2024 Jan 16;10(1). ucpress.edu
- 21. Biswas A, Talukdar W. Intelligent Clinical Documentation: Harnessing Generative AI for Patient-Centric Clinical Note Generation. arXiv preprint arXiv:2405.18346. 2024. [PDF]
- 22. Barnabe C, Osei-Tutu K, Maniate JM, Razack S, Wong BM, Thoma B, Duchesne N. Equity, diversity, inclusion, and social justice in CanMEDS 2025. Canadian Medical Education Journal. 2023 Mar;14(1):27. nih.gov
- 23. Anyanwu A, Olorunsogo T, Abrahams TO, Akindote OJ, Reis O. Data confidentiality and integrity: a review of accounting and cybersecurity controls in superannuation organizations. Computer Science & IT Research Journal. 2024 Jan 21;5(1):237-53. fepbl.com
- 24. Rahim MJ, Rahim MI, Afroz A, Akinola O. Cybersecurity Threats in Healthcare IT: Challenges, Risks, and Mitigation Strategies. Journal of Artificial Intelligence General science (JAIGS) ISSN: 3006-4023. 2024 Dec 3;6(1):438-62. <a href="https://doi.org/10.1007/journal.com">boulibrary.com</a>

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