Being Fit: The Ethics of Practice Diversification in Performance Psychology

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The ethics of practice diversification in the field generically described as performance psychology—including sport psychology, organizational consulting, and performing arts psychology—is examined. Since the field is in the process of development and psychologists come to this type of practice from a variety of paths, ethical issues in this type of practice bear particularly careful attention. This article reviews the primary ethical issues involved, including preparation for diversified practice; competence; interpersonal and relational issues; and presentation to the public. Currently emerging concerns are also discussed. The article concludes with specific suggestions for the practitioner interested in this field.

Keywords: ethics, sport psychology, performance psychology, consultation, competence

As a practicing psychologist, you are known for your expertise in sport psychology. Maureen, a 21-year-old woman who has recently recovered from a serious speed skating accident, contacts you at the recommendation of her coach, Janice, a trusted and skilled referral source. Although sufficiently recovered to resume her sport, Maureen describes herself as currently hesitant and lacking confidence. You anticipate that you will obtain some current information and then consult with her briefly to strengthen her mental skills as she returns to skating.

When Maureen arrives for her appointment, she speaks in a rambling manner but with considerable intensity. She describes not only the accident and unexpectedly slow recovery, but also recent destabilizing changes in her living situation. Additionally, her boyfriend has just broken up with her. She says that she is feeling lost and confused, comments that “everything is all connected,” and wonders both metaphorically and actually, “Where’s home?”

Whether at the time of intake or further into the consultation process, the diagnostic and treatment dilemmas engendered by a client such as Maureen may occur for consultants working in a variety of performance domains. How should you respond to Maureen’s presentation? Is her situation truly an opportunity for sport psychology consultation or should you reconsider? If she needs therapy, will you engage in the process yourself, or refer her to a colleague?

What determines your answer? Is it the initial contact and service request? Is it a function of your anticipatory assumptions about who you were going to see and what you were going to do? Is it the differential fee that you have specified for performance consultation in contrast to therapy? What if your primary training in psychological skills methods for athletes was through a department of kinesiology? Or what if, as someone with doctoral training in organizational development, you’ve been increasingly intrigued by the crossover possibilities apparent in working with athletes? And what, if any, information will you convey back to Maureen’s coach, Janice?

This article is intended to examine some of the elements involved in practice diversification into the fairly new and intriguing field of performance psychology. The broadest question is: How does a psychologist practice ethically while diversifying practice? More specifically: What is performance psychology? Who can practice it? What kind of training do psychologists need in order to perform it? What ethical issues are particularly salient to this field? Although answers to these questions may not yet be definitive, it is possible to specify ways in which psychologists can diversify safely and responsibly.

What Is Performance Psychology, How Is It Defined, and Who Does It?

Performance psychology, in a somewhat tautological definition, can be considered the psychology of performance. It is not just any kind of performance, however; typically, it refers to excellent performance within a field where excellence counts. Regardless of the field, performers “must meet certain performance standards: They are judged as to proficiency or excellence, there are consequences to poor performance, [and] good coping skills are intrinsic to excellent performance” (Hays & Brown, 2004, p. 19). This type of performance also has a temporal dimension: The performer’s particular talents and skills must be delivered at a specific point in time (Brown, 2001). Other interpretations of performance focus on the achievement of competence at a particular activity, in which performance before others is a central defining feature (Emmons & Thomas, 1998).
Considering performance psychology from this broad perspective, the primary domains of this field include sport psychology, organizational/consulting psychology, and performing arts consultation. A typical performance psychology client might be an athlete, a dancer, a CEO, a fireman, or a group or team of these performers. The task of the performance consultant is to assist in the development of more effective performance within the particular domain (Kampa & White, 2002).

The umbrella of performance psychology draws its knowledge base, energy, legitimacy, and clientele from three somewhat distinct traditions: sport psychology, consultation, and psychotherapy. With a long history of research and practice regarding the mental skills associated with excellent athletic performance, sport psychology is a field rich in relevant information concerning performance issues. This information, however, is relatively unknown within the field of psychology (Andersen, Van Raalte, & Brewer, 2001; Brown, 2001; Petrie & Diehl, 1995). Business consultation and executive coaching—depending on the domain, focus, and level of intervention—derive from family systems theory, mental health consultation, organizational development, and life coaching (Dean, 2001; Jones, 2002; Kampa-Kokesch & Kilburg, 2001; Newman, Robinson-Kupiis, & Fuqua, 2002; Wynne, McDaniel, & Weber, 1986). Psychotherapy brings to the mix various bases of knowledge. Among its many contributions, most relevant to performance psychology are: practical, short-term, and positive applications, such as cognitive–behavioral therapy, solution-focused therapy, and positive psychology; the value of accurate assessment to relevant practice; and the finely tuned awareness of human interaction (De Shazer, 1985; Meyers, Whelan, & Murphy, 1995; Murphy, 1995; Seligman & Csikszentmihalyi, 2000).

As a performance consultant, are you a consultant, a coach, or a therapist? The answer to this question for any individual psychologist involves a mix of skill, focus, definition, legal regulation, clientele or setting, and common usage, as well as advertising and marketing. There is some overlap among the three terms, although the primary distinction is generally made between therapist and consultant or coach. Haber, Rodino, and Lipner (2001) comment that the difference between these terms involves problem definition and people being treated. Thus, they suggest, “Psychotherapy tends to identify problems and flaws . . . [whereas] coaching . . . is a positive term that is filled with optimism and possibilities. Coaching tends to focus on a specific problem with no implied evaluation about the person who has this problem” (p. 47). Coaching is further separated from long-term, open-ended psychotherapy by its temporal framework and goal or outcome focus (Haber et al., 2001). The fact that a number of contemporary methods of psychotherapy also contain these characteristics is descriptive of the overlapping nature of these terms and practices.

Another set of definitions of consultation or coaching focuses on interpersonal and client characteristics. In contrast to psychotherapy, it is proposed, consultation generally involves less intimacy, decreased focus on relational dynamics, and—at least in theory—work with clients who have less diagnosable psychopathology than those seeking psychotherapy (Harris, 2002; Younggren & Gottlieb, 2004).

Further muddying the waters, the majority of performance consultants are not psychologists (Winum, 2003). Additionally, consultees, clients, or consumers may express a preference to work with a coach or a consultant, rather than someone labeled a psychologist, on the assumption that psychologist implies psychopathology. For psychologists, it is important to distinguish between issues of title and scope of practice as compared with marketing or business preference. These issues are elaborated below, in the section on ethical issues of practice.

Why Now?

What is it about the late 20th and early 21st centuries that has encouraged the burgeoning and proliferation of performance consultation? A number of interwoven strands seem to have converged, including practitioner psychologists’ dissatisfaction and frustration with the strictures of managed care, the encouragement and development of niche practices, the shift in sport psychology (and other performance arenas) from research–academic to practice focus, and the popularity of various paradigms that emphasize development rather than pathology and address wellness, growth, health, and change (Brown, 2001; Foster, 2002; Haber et al., 2001; Hays & Smith, 2002; Lestyk, 1998; Murphy, 1995; Seligman, 2002).

Along with the zeitgeist that encourages and supports the emergence of performance psychology, a number of cautions are worth noting. Psychologists interested in practice diversification may be at somewhat heightened risk. This field is emerging; psychologists may discover it following graduate training. Those drawn to performance psychology may be more likely than others to have personality characteristics that are both assets to developing a new type of practice and yet need careful monitoring. Because this field is out of the ordinary, interested psychologists may be more than typically entrepreneurial, adventurous, and creative. Further, in some aspects of performance consultation, the lure of money, fame, or other types of reward may create opportunities for ethical slippery slopes. Additionally, psychologists working outside of the clinical consulting office, or with people from other disciplines, engage within systems that may have different rules and expectations regarding people’s interactions in the “real world.” Finally, by definition with an emerging field, relevant research is limited, and the ethical guides that exist may have some limitations as well, either as to scope or relevance.

What Is Ethical Practice?

Ethics refers to both practice and process. One can consider ethical codes as prescriptive and proscriptive. From a formal perspective, “Ethics is defined as the rules or standards governing the conduct of members of a profession” (Committee on Professional Practice and Standards, 2003, p. 595). At the same time, ethics can be described as a continuing process of attending to one’s knowledge, beliefs, values, and practices, “a process through which we awaken, enhance, inform, expand, and improve our ability to respond effectively to those who come to us for help” (Pope & Vasquez, 1998, p. xiii).

The word competence is derived from the Latin competens and refers to “being fit.” In turn, fitness implies both health—perhaps the health of this new field—and capacity. In this sense, fitness refers to all of the elements of ethical practice: sufficient preparation, competent practice, and responsible risk management.
Issues of training, competence, and ethics are highly interwoven. While there are no guarantees, certain ethical activities increase one’s good practice. Among those important safeguards, particularly when diversifying professionally, would be affiliation with a professional organization or organizations that have ethics codes; some documentation of the development of one’s specific competence; maintenance of resources for both consultation and peer review; and a particular understanding of and sensitivity to the application of ethics guidelines in relation to emerging practice areas (Hays & Brown, 2004).

Major Ethical Issues

Whether preparing for a practice in performance psychology or maintaining such a practice, the ethical psychologist needs to attend to a number of relevant issues. For ease of understanding, these issues are described below within the following clusters: preparation for practice, competence, interpersonal and relational issues of practice, and those connected to the ways in which performance psychologists present themselves to the public. Various emerging ethical issues also bear reflection.

Preparation for Practice

In a field as loosely organized and minimally defined as performance psychology, what is involved in adequate professional preparation? Although some aspects of performance consultation apply generally, if one examines the three predominant performance domains of sports, business, and the performing arts, it becomes apparent that the formal research and knowledge base varies widely across these areas. Further, psychologists come to these domains with differing backgrounds, strengths, philosophies, theoretical orientations, and practice perspectives. For example, a competent psychologist working with athletes will need to be knowledgeable about the large field of sport psychology. Guidelines for competent practice exist (“Proficiency in Sport Psychology,” n.d.); certification has been developed (Zizzi, Zaichkowsky, & Perna, 2002); a specific code of ethics has been adopted (Association for the Advancement of Applied Sport Psychology [AAASP], n.d.); and reflections and concerns about ethics have been described (Koocher, 2004; Moore, 2003; Sachs, 1993; Whelan, Meyers, & Elkins, 2002). Similarly, a practitioner working within organizational consulting will need familiarity with organizational development, whether at the individual, group, or organizational level (Lowman, 2002); education and training principles have been developed (Education & Training Committee, 2000); and the ethical practice of consulting psychology has been discussed extensively (Lowman, 1998; Newman et al., 2002). Since the field of performing arts consulting is the most recent entrant to the field, much of the preparation for a performing arts consultant will involve extrapolation from other areas of expertise (Hamilton, 1997; Hays, 2000, 2002; Hays & Brown, 2004).

 Adequate preparation for performance consulting generally involves a mix of both formal and informal knowledge development. Formal elements include those derived from one’s academic degree preparation and subsequent structured training. Relevant informal preparation may involve performance experience, informal training opportunities, and relevant formative life experiences (Hays & Brown, 2004).

Formal Preparation

Formal academic training. For psychologists, formal graduate training in psychology constitutes the keystone for the development of competence in performance consultation. It is the necessary—although not the sufficient—element. One’s formal academic training in the practice of psychology will include the development of general assessment, counseling, and therapy skills in relation to individuals, families, or groups. Cognitive, behavioral, and short-term approaches often provide the best fit for performance consulting. Furthermore, this formal training is designed at least in part to allow the transfer of knowledge from one setting to another. The capacity to generalize one’s knowledge is often necessary if one is going to diversify one’s practice—or, having diversified, chooses to elaborate on this diversification. Specialized knowledge can thus be built on the ground of one’s formal training.

As the diversification of practice occurs, formal training also assists psychologists in recognizing both what they know and do not know (Belar et al., 2001; Brown, 2001; Glueckauf, Pickett, Ketterson, Loomis, & Rozensky, 2003). For example, even though a consultant might not be hired—or want—to conduct family therapy, the psychologist still needs to understand the particular ways in which family systems operate. A consultant to family businesses recently reflected:

If you come from a purely [industrial/organizational] background without the family systems orientation, you may not recognize that in a family business, there are the problems of regular business plus a few that families “manufacture.” . . . If you have worked a while as a therapist, you know that, as in therapy, family members don’t always want to solve the problem. They don’t always give you the straight scoop, and sometimes they do try to sabotage you, or they set it up in a way that makes it very difficult. Families are families. They sometimes do a lot of hurtful things to each other. (Hays & Brown, 2004, p. 258)

Formal academic and clinical training may not be sufficient to recognize and understand the particular performance field (Education & Training Committee, 2000). This lack of experience and expertise can be both troubling and troublesome. We might characterize “psychologists’ hubris” as the tendency to think that by virtue of our graduate degree we are entitled to place an adjective in front of the regulated title of “psychologist” (Hays & Brown, 2004; Petrie & Diehl, 1995; Sachs, 1993). In working with athletes, for example, Gould and Damarjian (1998) identified six major barriers that psychologists might encounter: (a) the stereotypical “shrink” image; (b) lack of sport-specific knowledge; (c) inadequate knowledge of organizational politics and power structures; (d) failure to pay the necessary dues to earn the athletes’ and coaches’ respect; (e) sport “hero worship”; and (f) failure to be practical in an athletic environment (p. 114). In the “shadow of narcissism,” the potential for adverse incidents increases (Koocher, 2004).

Structured, postdegree training. Because performance psychology often involves a blend of fields, formal post degree training allows consultants the opportunity to supplement and expand their prior knowledge base (Brown, 2001). For example, a clinical psychologist interested in working within business organizations may study leadership and teamwork training in a business school. A counseling psychologist may take courses in motor
learning through a department of kinesiology to develop competence in working with athletes.

**Informal Preparation**

**Performance experience.** One underrecognized but important element to performance consultation is the practitioner’s own performance experience. This background creates the opportunity for rapid rapport development and enhanced credibility with one’s performer clients. A consultant who is a musician understands the audition process, recognizes shifts in attention when on stage, and can appreciate the tension and tempo of a dress rehearsal. Adaptation may be needed if the consultant is classically trained but is working with an R&B band. Further extrapolation may be needed to recognize the similarities and differences when this music-knowledgeable psychologist provides performance consultation to an actor.

Performance experience can be broader than the direct knowledge acquired by the consultant in the relevant domain. It may also include learning that occurs through one’s performance consulting. Generalizing from what one has learned in relatively easy situations to more complex ones provides its own unique education. Similarly, transfer of knowledge from one domain to another involves generalization and differentiation (Hays, 2000, 2002; Jones, 2002).

**Informal training.** Proficiency, particularly in developing fields, is also gained through informal means (Belar et al., 2001; Brown, Gould, & Foster, 2005; Glueckauf et al., 2003; Hays & Brown, 2004). One often learns through relevant reading, observation, or direct experience in the domain. Other elements of informal training may involve being coached, mentored, or supervised. A vital aspect of competent consultation includes the development of a network of colleagues who can serve as sounding boards, resources, or means of peer review when the consultant encounters challenging situations. The expansion, breadth, and depth of informal training gives the practitioner the opportunity to understand commonalities across domains and gain specific knowledge within particular domains.

**Formative life experiences.** One natural but not often acknowledged element of training involves recognition of the use of oneself— one’s personality, values, history, and perspectives—all the things that are essential when one human develops an authentic relationship with another. We cannot schedule or structure these significant life events that mold our being, yet these experiences appear to be essential to the process of becoming an effective consultant. They allow for a communicated empathy with one’s clients—regardless of whether, in the actual consultation situation, the consultant chooses to share these experiences. Disclosure will be a function of the type of consultation, the consultant’s theoretical orientation and personal perspective, and the immediate interpersonal situation.

An industrial–organizational psychologist who works with public service workers commented:

I grew up in a blue-collar family. . . . My dad was a plumber. I’ve always respected the skill that people have whether it’s an electrician or a carpenter or a plumber, a firefighter or a police officer. I’m just fascinated by how people do their work. I can’t even count the hours I’ve spent in patrol cars and firehouses. I don’t pretend that I can do their job, but I do know enough about the nature of their jobs by having actually performed those kinds of things with their help or watching them do it. (Hays & Brown, 2004, p. 264)

The psychologist who has prepared for practice diversification and continues that process does so in order to be competent in this area of practice. The generic types of knowledge and skills necessary for performance psychology practice are described next, along with a discussion of relevant APA standards in relation to competence.

**Competence**

**Knowledge and Skills**

Competent practice diversification involves three levels of knowledge and skills: foundational skills, domain-specific knowledge, and contextual intelligence (Brown et al., 2005; Hays & Brown, 2004; Sternberg, 1985). This pyramid of capacity, with each element vital yet built on the preceding, can be represented by the acronym FIT: foundational knowledge, issues knowledge, and targeted tacit knowledge.

The essential foundational skills for performance psychology will have been learned by a practitioner psychologist during graduate training or with supplemental training (e.g., “Proficiency in Sport Psychology,” n.d.; Education & Training Committee, 2000; AAASP, n.d.). These foundational skills for performance psychology include: relationship or clinical counseling skills, change skills, knowledge of performance excellence, knowledge of the physiological aspects of performance, and knowledge of systems and systems consultation (Hays & Brown, 2004). In addition to the foundational skills, a performance consultant needs to understand the performer’s specific domain (Hays, 2000, 2002; Jones, 2002; Martin & Cutler, 2002; Poczwardowski & Conroy, 2002; Weinberg & McDermott, 2002). At the most specific level of knowledge, in regard to a particular consultation situation, the practitioner needs to have contextual intelligence (Hays & Brown, 2004; Terenzini, 1993). Initially described by Sternberg (1985) as the pragmatic element of intelligence that attends to the situation in which purposeful action is taken, it has been further developed, in the context of performance psychology, as “knowing the culture and context of the specific setting in which the individual operates” (Brown et al., 2005, p. 54).

**APA Standards Regarding the Boundaries of Competence**

Whether or not one is engaging in a new area, “practicing psychologists must continually deal with the ethical and professional issues involved in expanding and updating their services” (Belar et al., 2001, p. 136). The APA standard most relevant to this issue is Standard 2.01 of the “Ethical Principles of Psychologists and Code of Conduct” (APA, 2002), relating to the boundaries of competence. This standard acknowledges the broad array of ways in which one may develop and maintain competence in a particular area. Standards 2.01(a), (c), and (e) are especially pertinent. Standard 2.01(a) says, “Psychologists provide services, teach, and conduct research with populations and in areas only within the boundaries of their competence, based on their education, training, supervised experience, consultation, study, or professional experience” (APA, 2002, p. 1063).


This standard indicates that there are a variety of ways in which learning can occur. Thus, it lists a number of methods that may be important to the development of competence. In situations where formal education is available, prudence would suggest that such education be obtained. As mentioned, for example, formal graduate or postdegree training is readily available in sport psychology and organizational psychology. For other aspects of performance psychology, extrapolated learning or adaptation may be necessary.

Standard 2.01(a) of the APA (2002) ethics code tacitly acknowledges the challenges inherent in developing knowledge for new areas of practice as well as situations in which the learning may occur following one’s doctoral degree. The ethical standard does not specifically define what is involved in such knowledge development. Especially at the postgraduate level, self-assessment can be a critical element. Various methods have been suggested. For example, Belar et al. (2001) provided a template in relation to readiness for delivery of services to patients with medical-surgical problems, followed by a specific, detailed application of readiness for delivery of services to women with breast cancer. Glueckauf et al. (2003) offered a self-study framework in relation to the delivery of telehealth services, while Hays and Brown (2004) made recommendations specific to performance consultants.

Standard 2.01(c) of the APA ethics code applies particularly to circumstances in which graduate training occurred in one field and the practitioner wishes to add a different area of practice. “Psychologists planning to provide services, teach, or conduct research involving populations, areas, techniques, or technologies new to them undertake relevant education, training, supervised experience, consultation, or study” (APA, 2002, p. 1064).

Many practitioners becoming involved in some aspect of performance psychology, particularly after obtaining their doctoral degree, will recognize the importance of this standard. Again, this standard allows for considerable variety in methods of learning. It suggests that deliberative relevant learning should occur if the psychologist intends to engage in another area of practice.

How much education or training should occur? As mentioned, self-assessment can assist the individual in determining what is needed. A practitioner psychologist already trained in the use of relaxation or imagery skills might benefit from a weekend workshop that elaborates on the use of these skills in performance settings. On the other hand, if a person’s background and training is in social psychology with minimal understanding of methods of working with people, this same workshop would most only touch on the necessary knowledge for this psychologist (Hays & Brown, 2004).

Standard 2.01(e) of the APA ethics code describes truly evolving areas of practice. It states,

“In those emerging areas in which generally recognized standards for preparatory training do not yet exist, psychologists nevertheless take reasonable steps to ensure the competence of their work and to protect clients/patients, students, supervisees, research participants, organizational clients, and others from harm. (APA, 2002, p. 1064)

The field of performance psychology is not totally new, nor is it yet fully defined. Instead, it exists in a middle or gray zone, with elements of both emerging and truly established areas of practice. Further, it makes use of techniques and populations that have been and are within the purview of other practitioners. Additionally, some psychologists will argue that this area is in fact a subspecialty of their general practice. Finally, as an emerging area, it is still not clear whether the preponderance of training should occur at the graduate or postgraduate level. This standard can serve as a reminder of the value of reason with regard to issues of competence.

*Interactional or Relational Issues in Performance Psychology Practice*

In addition to competence, many of the issues involved in ethical practice are interactional and reflect the particularly relational context of consultation. Among the most vital of these issues are informed consent, the often triadic nature of consultation, confidentiality, multiple role relationships, boundaries, and different cultures of fee relationships. Although in actuality these issues are often intertwined, for clarity of discourse they are described separately.

*Informed Consent*

In any type of professional interpersonal situation, whether counseling or consultation, clients are entitled to understand the anticipated benefits, risks, and expectations of service. This concern is reflected in Standard 3.10 of the APA ethics code:

> When psychologists conduct research or provide assessment, therapy, counseling, or consulting services in person or via electronic transmission or other forms of communication, they obtain the informed consent of the individual or individuals using language that is reasonably understandable to that person or persons. (APA, 2002, p. 1065)

It is essential that the performance psychologist think through the ways in which informed consent for consultation is both similar to and different from that for psychotherapy. The complexity of the organizational context often complicates informed consent (Newman et al., 2002). In consultative situations, the degree to which consent is truly voluntary may be altered by subtle systemic pressure (Koocher, 2004). To the extent that consultees can accurately understand and choose to engage with the consultant, self-determination is increased and some of the inherent systemic power imbalance may be rectified (Newman et al., 2002).

*Triadic or Systems/Organizational Context*

Who is consenting to the service and who is the service for? Psychotherapy (at least in theory) is dyadic: therapist and client. In contrast, as Newman and colleagues succinctly stated, “A distinguishing feature of consulting relationships is their triadic nature” (2002, p. 733). Consultation typically involves three layers: the consultant, the consultee or consultee system, and the client or clients affected by the consultee. Although the consultee may be more or less involved, depending in part on the performance domain, service, and practitioner, that intermediary is at least implicitly involved.

Within the APA ethics code, Standard 3.11(a) speaks directly to systemic and organizational issues. In describing psychological services delivered to or through organizations, the standard states,

> Psychologists delivering services to or through organizations provide information beforehand to clients and when appropriate those directly affected by the services about (1) the nature and objectives of the
services, (2) the intended recipients, (3) which of the individuals are clients, (4) the relationship the psychologist will have with each person and the organization, and (5) limits of confidentiality. (APA, 2002, p. 1066).

In all domains of performance psychology, the system or organization within which an individual or group functions needs to be recognized and acknowledged, whether in relation to confidentiality, power, financial remuneration, or impact and effectiveness (Brown et al., 2005). A systemic issue may be as (seemingly) simple as the influence of a pushy stage mother who is paying for performance consultation for her stage-frightened daughter (Hamilton, 1997). It may be as multilayered and financially fraught as being hired by a professional sport team that expects the sport psychologist to work with managers, staff, team members, and individual players (McCann, 2005; Moore, 2003).

Confidentiality

“Except for the ultimate precept—above all, do no harm—there is probably no ethical value in psychology that is more inculcated than confidentiality” (Bersoff, 1999, p. 149). Embedded in the systemic complexities of consultation are those regarding confidentiality. In part this is a function of various power differentials. The person or system that is paying for services may anticipate a proprietary right to information. Beyond that, various systems are accustomed to different boundaries around confidentiality than those prescribed for psychologists. The athletic director or general manager of a sports team, for example, may be clear that certain information does not get shared with the media; on the other hand, this same person may assume that those working within the organization—including the sport psychologist—are all part of the team and thus that intraorganizational confidentiality should be moot. In establishing and maintaining a contractual working relationship, the consultant, then, will need to be explicit about elements of confidentiality—as well as their limits (Koocher, 2004; Moore, 2003; Newman et al., 2002; Sachs, 1993).

The shift from not acknowledging that one is seeing a client to a consultative teachable moment in the dining hall or on the team bus implies that confidentiality shifts from process to content. In some domains and settings, confidentiality may revolve more around what is being shared than that it is being shared (Andersen, Van Raalte, & Brewer, 2001; Hamilton, 1997; Van Raalte, 1998). Different norms of time and space may need to be developed and discussed (Andersen et al., 2001; Moore, 2003). “Practitioners learn to perfect the ski-lift consult, the bus-ride consult, the 10-min breakfast table team-building session, the confidential session in . . . hotel lobbies, parking lots, and trainers’ tables” (McCann, 2000, p. 211).

Confidentiality in consultation is more complicated than the mere issue of acknowledging whether the psychologist is or is not working with an individual (Koocher, 2004). In situations where the consultant works not with an individual but with a group of performers, confidentiality becomes more complex (Hamilton, 1997). Especially within the worlds of professional athletes and performing artists, the confidentiality needs of stars or celebrities must be handled with particular sensitivity (Gould & Damarjian, 1998; Hamilton, 1997).

Multiple Role Relationships

“Psychologists who are in professional roles or relationships with clients, supervisees, or students may intentionally, unintentionally, or unforeseeably find themselves in a second role or relationship with that same individual” (Lamb, Catanzaro, & Moorman, 2004, p. 248). Although an immediate reaction might be to avoid any such additional role or relationship, in fact, the APA ethics code recognizes that practitioners’ responses can be somewhat more nuanced: “Multiple relationships that would not reasonably be expected to cause impairment or risk exploitation or harm are not unethical” (APA, 2002, p. 1065). Determining whether any particular relationship or action is or might be exploitive or harmful remains ambiguous (Lamb et al., p. 253). In some situations, it has been suggested, rigid maintenance of a singular role or relationship could potentially become unhelpful, harmful, or destructive (Younggren & Gottlieb, 2004).

Although sexual relationships are specifically eschewed, nonsexual multiple role relationships have the potential to be normative in particular settings, such as rural, small, isolated, or closed communities (Andersen et al., 2001; Campbell & Gordon, 2003; Lamb et al., 2004). Many performance settings and circumstances take on qualities of being isolated and self-contained (Hamilton, 1997; Hays, 2002; Moore, 2003; Van Raalte, 1998). “[T]eams and sport organizations are small communities of individuals that are largely self-contained, and increased contact between athletes, management, and the sport psychologists is inevitable” (Moore, 2003, p. 601). It is not unusual for a contractual consultative relationship to develop out of a prior relationship with some member of a system. In fact, multiple role relationships may be “more the norm than the exception” in some settings (Newman et al., 2002, p. 740), and certain multiple relationships, particularly in consultative situations, may be unavoidable, normative, obligatory, or beneficial (Andersen et al., 2001; Koocher, 2004; Lamb et al., 2004; Younggren & Gottlieb, 2004).

Multiple role relationships are complex situations that involve different expectations from one performance culture to another. Psychologists who have diversified and developed a consultation practice may in particular need to be conscious of the challenges and expectations they and others carry with regard to multiple role relationships. Supervision and consultation provide some of the best means of monitoring these potentially charged situations (Andersen et al., 2001; Hays & Brown, 2004; Sachs, 1993). Annually, APA’s Ethics Committee prepares a report regarding ethics complaints for the prior year. Routinely, the majority of complaints involves concerns about dual relationships, whether of a sexual or nonsexual nature (e.g., “Report of the Ethics Committee,” 2004).

Boundaries

Professional boundaries “derive from the rules of the professional relationship that distinguish it from business or social relationships” (Knapp & Slattery, 2004, p. 553). Traditional training as a psychotherapist and the APA ethics code reflect boundary regulation appropriate to the therapy office. Boundaries are more complex, and boundary issues potentially more of a concern, in nontraditional settings or services (Koocher, 2004; Knapp & Slattery, 2004).
Recognizing that boundaries may have contextual elements, a useful distinction has been made between boundary crossings and boundary violations (Guthiel & Gabbard, 1993). Although a boundary crossing occurs when a professional deviates from the absolute professional role, the crossing in itself may be helpful, neutral, or harmful. “Boundary crossings can become boundary violations when they place clients at risk for harm” (Knapp & Slattery, 2004, p. 554).

Certain situations and settings may be designed to increase the likelihood of loosened boundaries. Among these are “natural environments,” including the work setting for much consultation, whether it is the factory, playing field, or stage. As Knapp and Slattery wisely pointed out, “This does not mean that the rules are different, but that the structure, expectations, and outcomes may be, thus leading to different guidelines governing the choice of interventions” (2004, p. 554).

Within some cultures, normative boundaries are different as well. Touch and air kisses are forms of regular greeting among many performing artists. The sport culture layers on further levels of physical intimacy, ranging from high fives through hugs and pats (Sachs, 1993). The consultant will need to think through and monitor the level of intimacy that allows connection but is not exploitative, harassing, or suggestive.

Fee Setting and Barter

Fees for consultation vary widely, depending in part on the domain, the size and type of project, and the experience of the consultant. On the one hand, the vast majority of performing artists are systematically underpaid for their services (Sidimus, 1998) and thus may have limited funds themselves. On the other hand, corporate culture is accustomed to seeing a direct link between price and value. Within business settings, charging minimally for one’s services might send an inadvertent message that would undermine one’s value. Although there is scant information concerning the fees charged by sport psychologists, a recent survey reported annual income ranging from $0 to $300,000, suggesting a wide variability in this field (Meyers, Coleman, Whelan, & Mehlenbeck, 2001).

Within certain cultures in which consultants work, barter for services, or nonmonetary recompense, sometimes occurs (Hamilton, 1997). Increasingly, some business consultants have been offered stock options in exchange for their services (Newman et al., 2002). Sports teams may be accustomed to doling out sports-wear or season tickets in lieu of money. The complexity of this type of activity suggests that clear negotiation at the beginning of the contractual arrangement may be most effective (Andersen et al., 2001; AAASP, n.d.).

Presentation to the Public

How does the performance consultant present him- or herself in this role? In what ways will the issues be the same or different from one’s psychotherapy practice? Among relevant ethical concerns are issues of advertising, marketing, title, and applicability.

Advertising, Marketing, and Title

Standard 5.01(b) of the APA ethics code addresses the issue of advertising, and in particular, the avoidance of false or deceptive statements. It is explicit:

Psychologists do not make false, deceptive, or fraudulent statements concerning (1) their training, experience, or competence; (2) their academic degrees; (3) their credentials; (4) their institutional or association affiliations; (5) their services; (6) the scientific or clinical basis for, or results or degree of success of, their services; (7) their fees; or (8) their publications or research findings. (APA, 2002, p. 1067)

Specific state or provincial laws with regard to title or scope of practice may further regulate the ways in which psychologists can describe themselves to the public.

This standard refers to all areas of practice, but may be especially relevant for performance psychologists to consider for a number of reasons. Since the field is still in the process of development, some of the dilemmas one encounters with regard to self-presentation may not seem as obvious as in traditional practice (Haber et al., 2001). Additional affective reactivity may occur in the face of competition from nonlicensed practitioners, people who allege that they offer similar services but are not held to the same stringent standards. The fact that they can make outrageous claims with impunity, no matter how frustrating, does not limit the applicability of Standard 5.01(b) of the APA ethics code for psychologists.

As indicated earlier, some psychologists prefer to describe the work that they do as performance psychologists using a label other than psychologist. Typically, the noun will refer to a coach or consultant while the modifying adjective will indicate the target group, for example, performance consultant or executive coach.

Applicability

If a psychologist is functioning in a role as a consultant or coach, does the APA ethics code even pertain? The ethics code is explicit in acknowledging that its scope applies to psychologists only in relation to their professional roles; however, it is critically important to note that those roles are not limited to the times when psychologists call themselves psychologists. In various contexts, it is clear that applicability is not merely a matter of how one labels oneself in a particular professional circumstance—the code applies to psychologists in all of their professional actions (Hays & Brown, 2004; Koocher, 2004; Levant, 2005).

Emerging Issues in Practice

Not surprisingly in an emergent field, certain issues that are relevant to practitioners are just being developed and acknowledged. Particularly salient are those regarding technology, diversity, and risk management.

Technology

Technology, and especially rapidly changing technology, has an impact on consultation in a variety of ways. In some situations, consultants are working with groups that themselves are virtual teams who work together in the absence of face-to-face contact (Connell, 2002; Freedman & Leonard, 2002). Increasingly, performance consultants provide some or all of their services via telephone or Internet. These services and their potential and limits add another layer of complexity to those described above. Among the most challenging are issues of technical competence; confidentiality, security, and privacy; and record keeping (Eizel,
Diversity

The importance of cultural competence is increasingly recognized in regard to psychotherapy practice. Similarly, the consultant needs multicultural competence to deal with varying issues of diversity and to understand and work with a culture that itself may or may not have sensitivity to diversity (Education & Training Committee, 2000; Ezel et al., 2004; Kraus et al., 2004; Pope & Vasquez, 2005; Sachs, 1993).

Risk Management

In an increasingly litigious society, for one’s own sanity as well as the welfare of one’s clients, the ethical consultant needs to act “to anticipate reasonably foreseeable risks and make every effort to avoid, minimize, and manage them” (Younggren & Gottlieb, 2004, p. 256). Imagining the worst possible scenario and making decisions that take that into account, although sobering, can allow for decision making that recognizes the best interests of all the players—including the consultant (Campbell & Gordon, 2003).

Implications and Recommendations for Performance Psychologists

Practicing in new or nontraditional ways holds considerable excitement and promise. It has been suggested here that it is possible to develop and maintain a practice in performance psychology in a competent and ethical manner. The increasing numbers of presentations, publications, conversations, and Web sites would suggest that this is a growing field. Only limited information exists regarding the financial viability of certain domains of performance psychology (e.g., Meyers et al., 2001).

The ethical psychologist who diversifies practice into the realm of performance psychology will give careful attention to a number of elements: appropriate preparation and supports, the various interactional issues that are especially relevant to consultation or coaching, and the ways in which one presents oneself in an ethical manner to one’s public. The following suggestions are designed to underscore the most vital elements for developing and maintaining a practice in performance psychology:

1. Regularly conduct a “fearless inventory” of your knowledge and skills. Build on what you know; broaden and deepen what you have yet to learn in the field to which you are heading. The many paths to effective performance consultation suggest that graduate education alone will rarely suffice (Belar et al., 2001; Glueckauf et al., 2003).

2. Obtain additional training. Systematically close the gap between what you already know and what you need to learn. Resources for training in the various domains of performance psychology are suggested in the appendix.

3. Document your additional training. Careful compilation of accumulated learning provides recognition of your competence and serves as a useful risk management procedure.

4. Develop and maintain a peer culture. Like-minded practitioners involved in similar work can provide support, supervision, and peer consultation. Organizational involvement at local, national, and international levels can be a rich source for the development of these connections (Hays & Brown, 2004; Koocher, 2004). Relevant organizations in the various domains of performance psychology are suggested in the Appendix.

5. Create a network of referral resources. Informal networks are an important element of a successful practice for a number of reasons. Network members might include clinicians to whom you can refer clients if you wish to remain in a consultative relationship, while the client needs psychotherapy (Van Raalte & Andersen, 2002). Other important networking colleagues may be practitioners in adjunctive professions, such as physical therapists, personal trainers, coaches, nutritionists, accountants—people who are better equipped to perform many of the functions that you might otherwise be called on to provide. Informal collaboration can offer additional sources of learning and information, as well as such practice-related benefits as new client referrals.

6. Maintain an active means of learning, questioning, and reviewing. In order to maintain competence, performance consultants have a responsibility to remain current regarding research and practice in their consulting domains (Winum, 2003). This may occur through conferences, courses, or workshops; via colleagues; or through self-directed reading and training. Some of the literature will even provide you with a checklist or questions you can use to help shape accurate self-reflection (e.g., Belar et al., 2001; Brown, 2001; Glueckauf et al., 2003; Moore, 2003; Pope & Vasquez, 1998, 2005; Younggren & Gottlieb, 2004).

References


Appendix

Suggested Resources for Professionals in Performance Psychology

Coaching and Consultation

CoachVille: http://learning.coachville.com/
International Association of Coaches: http://www.certifiedcoach.org/
International Coach Federation: http://www.coachfederation.org/
The Positive Psychology Center: http://www.positivepsychology.org/

Coaching Training for Mental Health Professionals

College of Executive Coaching: http://www.executivecoachcollege.com/
Institute for Life Coach Training: http://www.lifecoachtraining.com/
MentorCoach: http://www.mentorcoach.com/

Performing Arts Psychology

Performing Arts Medicine Association: http://www.artsmed.org/
International Association for Dance Medicine and Science: http://www.iadms.org/

Sport Psychology

American Psychological Association Division of Exercise and Sport Psychology (Division 47): http://www.apa47.org
Association for the Advancement of Applied Sport Psychology: http://www.aaasponline.org

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