

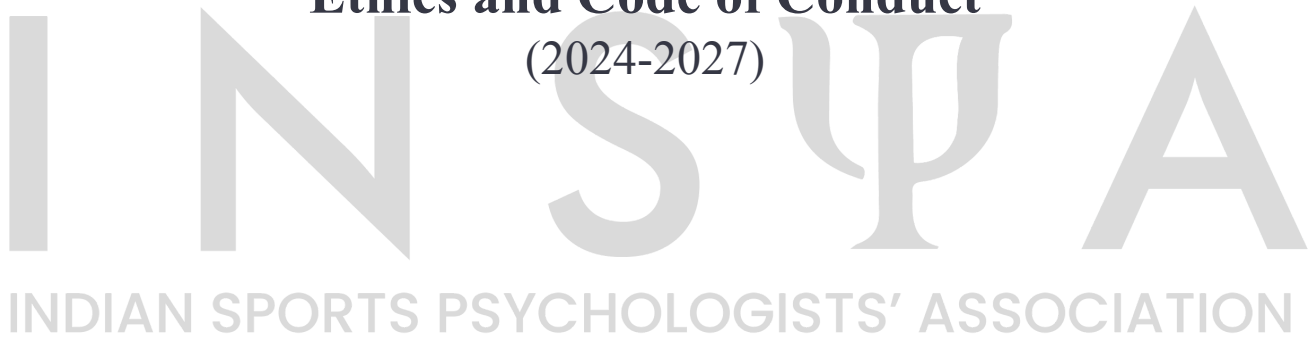


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# **INSIPA Indian Sport Psychologists' Association**

## **Ethics and Code of Conduct**

(2024-2027)



## Table of Contents

Overview	2
Definitions	3
INSPA Values	5
Core Professional Practice Principles ( <i>adapted from ISSP</i> )	6
Professional Standards for Good Practice	7
1. Practitioners must acquire the right education and follow a competence-based approach to practice in India.	7
2. Practitioners should maintain informed consent in their practice.	12
3. Practitioners should maintain Confidentiality & Protect Client Data	15
4. Practitioners should Consistently Maintain Professional Conduct	19
5. Practitioners should develop Protocols and Guidelines that try to Safeguard the Professional and the Profession.	23
6. Practitioners should Develop an Informed Approach in their Practice that is Sensitive with regard to Anti-discrimination and Anti-oppression	25
How was this document developed?	27
Bibliography and References	28



## Overview

This edition of the Ethics and Codes of Conduct was produced through the Indian Sport Psychologists' Association by a working group drawn from the members engaged in professional practice and representatives from relevant experts in particular practice areas. The Ethics and Code of Conduct guidelines aim to define good practice for all practising Sport Psychologists (referred to as 'Practitioners' henceforth) whether emerging or established and offer recommendations for ethical practice and better decision-making. The Ethics and Codes of Conduct have been designed for broad application across the full range of applied sport psychology, academia, and research in sport psychology in India.

The Ethics and Code of Conduct will be reviewed in accordance with the association's policy within a maximum period of 3 years or sooner if deemed necessary in order to reflect current legislation, research evidence and practice contexts.

## Goals

The Ethics and Codes of Conduct are intended to provide guidance for practitioners and communicate standards of professional conduct that can be applied by the INSPA members and other practitioners who choose to adopt them in India. The document is not meant to serve as a legal foundation for civil lawsuits. Whether a practitioner has broken the Ethics and Codes of Conduct does not, on its own, mean that they will be held accountable in court, have their contracts upheld, or face other legal repercussions.

INSPA encourages all its members to uphold the standards of the Ethics and Codes of Conduct and to comply with the rules and procedures used to enforce them.

INDIAN SPORTS PSYCHOLOGISTS' ASSOCIATION

## Definitions

### Client

In the context of sport psychology practice, a "client" typically refers to an individual or group of individuals who seek the services of a practitioner to enhance their mental skills and well-being in relation to sports and athletic performance. The term "client" is commonly used in various therapeutic and coaching settings to describe the individuals who are receiving guidance, support, and expertise from a trained professional. In sport psychology, clients could include athletes, coaches, teams, and even parents or support staff involved in the sport context.

Practitioners work with clients to help them develop mental strategies and techniques that can positively impact their performance development and overall mental well-being.

It's worth noting that the term "client" is used to emphasise the collaborative and supportive nature of the relationship between the practitioner and the individual seeking assistance. This relationship is built on trust, open communication, and a shared commitment to achieving the client's desired outcomes in the realm of sports and competition.

### Sport Psychologist

A sport psychologist is a qualified professional who specialises in applying psychological principles and techniques to enhance the performance, mental well-being, and overall development and experience of athletes, parents, coaches, and individuals involved in sport and physical activities. Their typical work includes but is not limited to working with athletes and sport teams to help them develop the mental skills and strategies necessary to achieve peak performance and overcome challenges.

A practitioner can work with a plethora of third parties (i.e., anyone associated with the client but not engaged in the therapeutic relationship) beyond the athlete, including but not limited to coaches, support staff, parents, organisations, management staff, associations, federations etc.

The terms "sport psychology" and "sports psychology" are closely related but have slightly different connotations.

- **Sport Psychology:** This term refers to the specific field of psychology that focuses on studying and understanding the psychological factors that influence an individual's performance in sports and athletic activities. It encompasses various aspects such as motivation, goal setting, anxiety management, concentration, teamwork, and overall mental preparation for optimal athletic performance. "Sport psychology" tends to emphasise the individual and their mental processes within the context of sports.
- **Sports Psychology:** This term is a broader phrase that can refer to the psychological aspects related to sports in a more general sense. It encompasses not only the individual athlete's psychology, but also broader psychological considerations related to sport culture, spectator behaviour, organisational dynamics within sport teams or leagues, and the psychological impact of sports on society as a whole. "Sports psychology" can encompass a wider range of topics beyond just the mental processes of athletes.

Both terms are used interchangeably at times, and the choice between them can depend on the specific context and focus of the discussion. The distinction is often subtle, and the choice of phrasing can reflect the emphasis on individual athlete performance versus the broader societal and cultural aspects of sport.

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## INSPA Values

**Duty of Care** - Practitioners strive to benefit those with whom they work and take care to aid and not do harm. In their professional actions, Practitioners seek to safeguard the welfare and rights of those with whom they interact professionally and other affected persons.

**Integrity** - Acting with integrity includes being honest, truthful, accurate and consistent in one's actions, words, decisions, methods, and outcomes. It requires setting self-interest to one side and being objective and open to challenge one's behaviour in a professional context.

**Respect** - Practitioners respect the dignity and worth of all people, and the rights of individuals to privacy, confidentiality, and self-determination. Practitioners are aware that special safeguards may be necessary to protect the rights and welfare of persons or communities whose vulnerabilities impair autonomous decision-making. practitioners are aware of and respect cultural, individual, and role differences, including those based on age, biological gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, and socioeconomic status, and consider these factors when working with members of such groups.

**Non-judgmental Attitude:** Alongside respect, a practitioner has a non-judgmental attitude & an unconditional positive regard for their clients.

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## Core Professional Practice Principles (*adapted from ISSP*)

**Beneficence and Concern for Others' Well-being:** Practitioners' actions are based on the principle of Beneficence and Concern for Others' Well-being. They obligate themselves to act for the benefit of others with whom they work (e.g., individuals, teams, organisations, students, trainees, and supervisees). They seek to safeguard the welfare of those with whom they work. They strive to be the best practitioners they are able to be while working with clients as well as in their own personal lives. The welfare of the people with whom they work as well as the standing in the member's profession takes precedence over the individual member's self-interest.

**Respect for People's Rights and Dignity:** Practitioners should conduct themselves in a manner that exemplifies respect for the dignity and worth of all people, and an individual's right to privacy, confidentiality, self-determination, and justice. In particular, they take special safeguards that may be necessary to protect the rights and welfare of persons or communities they serve whose vulnerabilities could impair autonomous decision-making.

**Social Justice and Responsibility:** Practitioners should not engage in unfair discrimination based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, socioeconomic status, or any basis proscribed by law, and take precautions to ensure that their potential biases do not lead to or condone unjust practices.

**Competence, Expertise and Proficiency in Professional Work:** Practitioners only provide psychological services within the boundaries of their professional competence, described by their knowledge, skill, training and experience. Competence refers to the practitioner's ability to provide those specific services to a requisite professional standard.

**Professional and Scientific Responsibility:** Practitioners engage in their practice relying on valid and reliable scientific frameworks, theories, and constructs. They only provide services within the boundaries of valid and reliable scientific knowledge. They maintain the highest standards of professional and scientific knowledge in their work by maintaining their knowledge related to the service they render.

**Integrity and Propriety:** Practitioners are aware of the high level of trust that is the foundation of their professional relationships with clients, trainees, students, and supervisees. Acting with integrity and propriety is reflected in being honest and fair in describing or reporting research, teaching and practice to other professionals, clients, or the public; it is guided by the values of honesty, truthfulness, accuracy, consistency, respect, and cultural sensitivity.

## Professional Standards for Good Practice

The following are the INSPA standards of good practice that a practitioner should value and follow.

### 1. Practitioners must acquire the right education and follow a competence-based approach to practice in India.

#### 1.1 Having the Right Educational Pathways to Practice in India

Practitioners offer a diverse range of services and hence need to be well-versed in delivering those services, especially since they demand a high level of specialised knowledge, extensive training, refined skills, and substantial experience. Competence stands as a vital criterion, signifying the capability of practitioners to provide these specific services in accordance with the requisite professional standards. It is expected that practitioners do not engage in delivering professional services that fall beyond their realms of expertise, skill, training, and familiarity.

Practitioners recognise the value of working within the acknowledged boundaries of their knowledge, skill, training, education, and experience as well as the continual improvement and maintenance of high standards of competence in their professional work. Competence holds significant importance in the field of sport psychology in the following way:

1. **Quality and effectiveness of services:** Competent practitioners possess specialised knowledge, extensive training, and practical experience in understanding the psychological aspects of sports performance. They are equipped with a comprehensive understanding of mental skills training, performance enhancement techniques, motivation strategies, and psychological interventions that can positively influence athletes' performance and well-being. By being competent in their field, practitioners can offer evidence-based, tailored interventions that effectively address the unique psychological needs of athletes and sports teams.
2. **Ethical responsibility:** Competence is closely tied to ethical practice in sport psychology. Practitioners have an ethical duty to accurately represent their qualifications, expertise, and limitations. Misrepresentation of competence not only compromises the integrity of the practitioner but also puts the well-being of clients at risk. By adhering to the principles of competence, practitioners uphold ethical standards, maintain transparency, and ensure that they provide services within their areas of expertise. It is imperative for practitioners to exercise caution and abstain from undertaking professional services that lie beyond the boundaries of their respective areas of knowledge, skill set, training, and practical experience. This fosters trust and promotes a safe and ethical practice environment.
3. **Client safety and well-being:** Competence is essential for safeguarding the safety and well-being of athletes and clients. Competent practitioners possess the knowledge and skills to identify and assess psychological factors that can impact performance, mental health, and overall well-being. They can accurately identify and refer in cases of clinical



concerns such as anxiety, stress, depression, and disordered eating. By staying up to date with advancements in research and best practices, competent professionals are better equipped to provide appropriate interventions, prevent potential harm, and refer clients to other qualified professionals when necessary.

4. **Professional reputation:** Competence plays a crucial role in building and maintaining the professional reputation of practitioners. Demonstrating expertise, delivering positive outcomes, and providing high-quality services foster credibility among athletes, coaches, and sports organisations. As competent practitioners consistently demonstrate their ability to make a positive impact on athletes' performance and well-being, they contribute to the overall reputation and recognition of the sport psychology profession. A strong professional reputation enhances opportunities for collaboration, referrals, and professional growth.

In India, pursuing a career as a sport psychologist typically involves a combination of education, training, and practical experience.

1. **Under-graduation:** The first step is to complete a bachelor's degree in Psychology or Sport Science or related fields. Aspiring practitioners can opt for a Bachelor of Arts (B.A.) or Bachelor of Science (B.Sc.) Degree in Psychology from a recognised university. During undergraduate studies, it is beneficial to focus on courses related to sports psychology, counselling, human behaviour, applied psychology and research methods.
2. **Post-graduation:** After completing a bachelor's degree, aspiring practitioners must pursue a master's degree in Sport Psychology or Applied Psychology with a specialisation in Sport Psychology. It is advisable to research and choose a program that aligns with one's career goals and interests.
  - **Doctoral-level Study:** Doctoral-level education in sport psychology provides students with a deep and comprehensive understanding of the psychological, emotional, and behavioral aspects of individuals in sports and exercise settings. This advanced knowledge equips professionals with the skills and competence needed to provide effective and ethical services. Ethical conduct is intrinsically linked to competence, and pursuing a doctoral qualification ensures that students are better prepared to navigate complex ethical dilemmas and challenges within the field. Doctoral-level study encourages students to engage in rigorous research that advances the scientific understanding of sport psychology. Doctoral study is not just a culmination of education but the beginning of a lifelong journey of learning and growth. Students commit to continuous professional development, staying current with emerging ethical standards and best practices in the field.
3. **Internship/Practical Experience:** Practical experience is crucial to developing the necessary skills and gaining exposure in the field of sport psychology. Internships or volunteer positions with sports teams, organisations, or institutes that focus on sports performance and athlete well-being can be beneficial for aspiring practitioners, under/with an experienced/senior practitioner. This practical experience will allow aspiring practitioners to apply theoretical knowledge, observe real-world scenarios, and work directly with athletes and coaches. Working with an experienced practitioner builds self-confidence and ensures ethical considerations are met. For more information on

supervised practice, see [section 1.3](#) on supervised practice, mentorship and internships.

4. **Professional Certifications:** Obtaining professional certifications can enhance competence and credibility as a practitioner. Associations for example, the International Society of Sport Psychology (ISSP), etc. offer professional development certifications for practitioners. However, pursuing only professional certifications without a strong foundational degree in Psychology or Sport Psychology or related fields will not ensure a right pathway towards professional qualifications. Such certifications often require a combination of educational qualifications, supervised practical experience, and passing a certification exam. Practitioners are suggested to research more about available certifications and choose based on their personal interests and needs.
5. **Continued Education and Professional Development:** Sport psychology is a dynamic field that constantly evolves. It is crucial to stay updated with the latest research, techniques, and interventions. It is highly advisable to attend workshops, conferences, and seminars on sport psychology to expand knowledge and network with professionals in the field. Working towards becoming part of a qualified practitioner registry (e.g., ISSP-R) may help further enhance credibility as a practitioner.

It's important to note that while sport psychology is an emerging field in India, the availability of specialised programs and dedicated career pathways may vary. Therefore, thorough research and exploration of universities, institutes, and professional organisations offering sport psychology-related programs and opportunities are essential.

### *1.2 Pursuing a Master's Degree in Sport Psychology*

In order to become a qualified practitioner, gaining a master's degree in sport psychology is mandatory.

1. **Specialised knowledge:** A master's degree in psychology provides a solid foundation of knowledge in the field of psychology, including areas such as cognitive processes, human behaviour, motivation, personality, and research methods. This broad understanding of psychology serves as the basis for further specialisation in sports psychology. Sport psychology involves the application of psychological principles and techniques to enhance athletes' performance, mental well-being, and overall sports experience. A master's degree equips practitioners with a comprehensive understanding of various psychological theories, concepts, and methodologies, enabling them to apply this knowledge effectively in a sports context.
2. **Sports-specific training:** While a general psychology degree provides a fundamental understanding of human behaviour, a master's degree in psychology with a specialisation in sport psychology offers more targeted training specifically tailored to the unique demands and challenges of working with athletes and sports teams. Practitioners can learn about performance enhancement techniques, mental skills training, team dynamics, and other sport-related psychological factors.
3. **Practical skills development:** Master's degree programs often include practical components, such as internships or supervised fieldwork, which allow aspiring practitioners to gain hands-on experience working directly with athletes and sport organisations. These practical experiences help develop essential skills in assessment, counselling, intervention, and performance enhancement strategies specific to the sport context.

4. **Professional credibility and competence:** Having a master's degree in psychology adds credibility to academic qualifications as a practitioner. It demonstrates to potential clients, employers, and colleagues that the practitioner has undergone extensive education and training in the field of psychology, including a specialisation in sports psychology thereby accruing relevant professional skills such as critical thinking, complex problem solving, research and data analysis, and ethical awareness and sensitivity. This can enhance professional reputation and increase competence.
5. **Further education and certification:** A master's degree in psychology can also serve as a stepping stone for those interested in pursuing advanced education, such as a Ph.D. or Doctor of Psychology (DPsych/PsyD). Advanced degrees can open up opportunities for research, teaching, and specialised practice. Additionally, requirements for becoming part of sport psychology charters and registries (e.g., ISSP-R, Certified Mental Performance Consultant) require a master's degree or higher qualifications.

### *1.3 Having Supervised Practice/Mentorship/Internships*

It is imperative for practitioners to undergo mentoring or supervised practice under experienced practitioners to gain insights and practical guidance.

1. **Skill development:** Supervised practice/ mentorship/ internships provide an opportunity for aspiring practitioners to develop and refine their practical skills under the guidance and mentorship of experienced practitioners. It allows them to apply theoretical knowledge in real-world settings, gain hands-on experience, and practise various assessment, intervention, and counselling techniques specific to sports psychology. Through Supervised practice/ mentorship/ guided internships, they can receive feedback, guidance, and constructive criticism to enhance their skills and professional competence.
2. **Ethical considerations:** Supervised practice/ mentorship/ internships plays a vital role in ensuring ethical practice in sport psychology. Working under the supervision/mentorship/internship of an experienced practitioner helps aspiring practitioners navigate complex ethical issues, adhere to professional standards, and maintain appropriate boundaries with clients. Supervised practice/ mentorship/ guided internships provide a platform for discussing ethical dilemmas, addressing confidentiality concerns, and maintaining the highest level of professionalism and integrity.
3. **Client safety and well-being:** Supervised practice/ mentorship/ internships are essential for protecting the safety and well-being of clients. Aspiring practitioners have the opportunity to consult with their supervisors/mentors regarding challenging cases, complex psychological issues, and potential risks. Supervision/mentoring/ internship ensures that they receive guidance in appropriately assessing and managing the psychological needs of athletes, monitoring potential mental health concerns, and making referrals when necessary. This supervision/mentorship/internship process promotes the overall welfare of clients and prevents potential harm.
4. **Professional development:** Supervised practice/ mentorship/ internships support ongoing professional development in sport psychology. It provides a platform for continuous learning, knowledge sharing, and professional growth. Supervisors and/or Mentors can offer valuable insights, share their experiences, introduce new research findings, and guide aspiring practitioners in staying up to date with advancements in

the field. Supervised practice/ mentorship/internships facilitate the cultivation of a reflective and critical mindset, promoting a commitment to lifelong learning and improvement.

5. **Accountability and quality assurance:** Supervised practice/ mentorship/ guided internships establish a system of accountability and quality assurance. By working under the guidance of a supervisor and/or mentors, aspiring practitioners undergo regular evaluations, assessments, and case discussions to ensure that their work aligns with best practices and professional standards. Supervised practice/ mentorship/ guided internships act as a quality control mechanism, promoting consistent and effective service delivery, and upholding the reputation of the profession.
6. **Professional networking and support:** Supervised practice/ mentorship/ guided internships provide aspiring practitioners with a valuable opportunity for professional networking and support. The supervisor and/or mentor offers guidance, career advice, and connections within the field. The supervisory/mentor-mentee relationship can foster professional relationships, facilitate collaboration, and expand opportunities for further development and career advancement.

#### *1.4 Using the assessments and technology that the practitioner has been trained for in order to support practice*

Practitioners should only use, assess, administer, and interpret assessments and tools (e.g., psychometric assessments) in technology (e.g., HRV, eye-tracking) that they are trained for. Practitioners should avoid using tools, assessments and technological tools that are meant for clinical interventions and assessments, e.g., the Rorschach Inkblot test. The only exception would be if the practitioner is ethically trained to use the instrument.

Practitioners should ensure the assessment data is stored and shared as discussed in [section 3.3](#) and [section 3.4](#) respectively

Practitioners should also avoid assessing the athlete's using physiotherapy or biomechanical equipment to conclude any sport psychology-based parameter.

## **2. Practitioners should maintain informed consent in their practice.**

Obtaining informed consent involves a process which is dynamic and relevant to the specific assessment, intervention or decision being made at that time. When there are substantive changes in the intervention or when the Practitioner has reason to consider the client may no longer consent, consent should be reviewed. Practitioner should ensure that their clients are enabled to play an active role in this process. Clients should be encouraged to ask questions whenever they are in doubt. Practitioners should be aware that a client's desire for help, and the immediate impact of the practitioner's supportive listening, may affect the client's ability to make informed choices about the help they wish to receive. They should also be aware that their own desires to help a client may bias their presentation of information, such as the probability of successful outcomes.

### ***2.1 Developing Informed Consent Agreement***

1. Practitioners should always ensure that they have sought and received the informed consent of those they work with, given their own free will, without undue influence. The concept of informed consent relates to the client's right to choose whether to receive psychological services and to make this choice on the basis of the best information available, presented in the most appropriate way.
2. The principles apply, whether the Practitioners work in the public, private or voluntary sector, or in independent applied practice. Practitioners should obtain the informed consent of the client in an appropriate manner prior to undertaking any assessment, intervention, or research activities.
3. Obtaining informed consent involves a process that is dynamic and relevant to the specific assessment, intervention or decision being made at that time. There should ideally be an ongoing dialogue between client and practitioner as part of the process of joint decision-making. At any point, the client should feel free to ask questions about the impact of the intervention and withdraw consent to continue.
4. Obtaining informed consent from minors differs from adult clients.
5. In order to ensure that the client has all the information necessary to make an informed decision about whether to take part or not in a psychological activity, they must be provided with relevant information in a format that is designed to meet their specific needs (for example, consent agreement/participant information sheet/privacy agreement).
6. Boundaries of Informed Consent: Practitioners have an obligation to ensure that prospective clients are informed of the extent and limitations to confidentiality with respect to anticipated services, the purposes of any assessment, the nature of the procedures to be employed or the intended uses of any product such as note-taking and/or audio and video recordings before the assessment or intervention starts.
7. What should practitioners ask the prospective client: whom they would wish to be informed of their assessment or intervention, if anyone; and the information they are willing to share where communication is essential, for example to the referring agent or organisation, management, or court. Wherever appropriate, including in the law, the client should have copies of reports or letters or be given feedback so that they are kept fully informed.
8. A practitioner who draws upon the work of other professionals in preparing a report should seek their consent, where possible and if not already in disclosed records, to include that material and should acknowledge its source in the report.



9. Practitioners should be aware of the complexities of obtaining informed consent to treatment due to the perceived power, status, and authority of the professional practitioner. It may not be clear if the consent given is freely given by the client or, for example, is part of a pattern of compliance towards authority figures. Equally, a client may say that they understand the explanation given by the practitioner, and accept a plan for intervention, in order to avoid the discomfort of being seen not to understand the practitioner's complex language and ideas.
10. There should ideally be an ongoing dialogue between client and practitioner, as part of the process of joint decision-making. At any point, the client should feel free to ask questions about the impact of the treatment and withdraw consent to continue.
11. Practitioners should attempt to intervene against the express wish of a client only after careful consideration and in line with relevant legislation, policies, and professional practice.

### **What should the informed consent document comprise?**

The practitioner should consider providing information about the following:

- what the psychological activity involves, as far as this is consistent with the model of interaction, e.g., there will be limits in the use of some non-directive therapies and psychometric assessments;
- the benefits of the activity, either directly to the client in the case of assessment or intervention, or indirectly in the case of systemic intervention, or to potential theoretical advances or service improvement;
- any alternative assessment or treatment options and their known availability;
- foreseeable risks and how minor or serious they may be, for example, the potential to feel worse at stages during therapeutic interventions;
- what might be the benefits with potential costs and risks to them of engaging or not engaging in the proposed psychological activity; and the client's right to withdraw their consent from assessment, treatment or intervention at any stage, along with information about any likely consequences of such withdrawal.

### ***2.2 Developing a Privacy Agreement***

1. Clients are entitled to expect that the information they give to Practitioners about themselves, and others will remain confidential. Practitioners have a duty not to disclose such information except as discussed below and to bring their confidentiality practice to the attention of their clients, employers, managers, and any other professionals involved.
2. Practitioners have a duty to inform involved parties of their confidentiality standards and practice at the point of first contact. Clients should be informed of the limits to confidentiality where information about them may be shared and confidentiality breached, for example for reasons of safeguarding requirements of the law, and public protection.
3. If disclosure of the information is deemed necessary, practitioners should obtain specific informed consent from their clients, making the consequences of disclosure as clear and unbiased as possible. There are a number of circumstances where this might not be possible or may not apply: for example, where the health, safety, security or welfare of the client or someone else may otherwise be put at risk; and if there are legal or safeguarding responsibilities, such as the need to avoid 'tipping off'. If

confidentiality is broken without consent, the client should be told what has been said and to whom, unless such disclosure may expose the client or others to serious harm or is contrary to legal or safeguarding obligations.

4. Practitioners may be asked to provide consultancy or advice to colleagues about an identified client, without that person's knowledge or when the client has indicated that they do not want to have direct contact with the practitioner. In these circumstances, the practitioner will need to consider their potential involvement and the need for consent.
5. A practitioner who draws upon the work of other professionals in preparing a report should seek their consent, where possible and if not already in disclosed records, to include that material and should acknowledge its source in the report. If a report is requested that draws upon previous or concurrent investigations of a client in other contexts, for example, session records in the preparation of a report for the multi-disciplinary team review, the client's consent, or the relevant authority's consent for that information to be used should be sought.
6. If Practitioners wish to use reports on clients which have been compiled by other professionals, they should do so only with the consent of those professionals and use the reports only in the context for which the report was specifically provided.



### 3. Practitioners should maintain Confidentiality & Protect Client Data

#### 3.1 Maintaining and Protecting Data through Record Keeping

1. Record-keeping helps in documenting and tracking the treatment plans, details of sessions, the services provided and the progress of the client. Record keeping can help the practitioner plan the sessions drawing from the areas they've covered or the areas that require focus. This can help them be aware of their work and can encourage reflexivity. Legally as well, record keeping is an ethical practice that can be beneficial. Especially when third parties (such as Team Management) are involved, record-keeping becomes an important requirement.
2. Records made, kept, or accessed by practitioners should be:
  - systematic and appropriately detailed;
  - in clear language/format;
  - accurate;
  - up to date; and
  - relevant to professional work and to the purpose for which they were collected
3. A practitioner is also responsible for the content of records and the language used. The records need to be maintained with honesty containing details such as the nature, delivery, progress and results of psychological services and details of fees charged. Additionally, the practitioner needs to be mindful of the client's context or setting in which they function and need to avoid attributing behaviour that has occurred under unusual circumstances to them. In such cases, it would be helpful to record the context in which the behaviour took place instead of generalising (changing the word) it to their personality.
4. Some organisations have their own mandated formats and other requirements when it comes to record keeping. A practitioner needs to be aware of these beforehand. Without a doubt, the language used in the records should strive to avoid the usage of any derogatory terms or pathologizing language for the client. As far as the details are concerned, they rest at the practitioner's discretion.
5. The level of detailing is a conscious choice. It is important to be precise and avoid ambiguous or vague terms. This would ensure that even after the services are terminated, the records can be of aid to a new practitioner and can help them obtain improved assistance.

#### 3.2 Maintaining Session Notes and follow-ups

1. Practitioners may wish to keep separate notes to aid their work, but which are not intended for sharing with others or to be part of the permanent client record. These notes, often called process notes, which are written for reflection on practice, should be anonymised with no other identifying links e.g. initials, or appointment time so that these notes are clearly not part of the client record.
2. Process notes may, for example, be used for reflection and supervision. Suppose process notes are made to assist in the compilation of a report. In that case, the material should be incorporated, as relevant, into the final report and the process notes are then destroyed.
3. The following information can be maintained in a record, which is usually obtained through information sheet and intake session:
  - Identifying data (e.g., unique client ID)



- Contact information (e.g., phone number, address, next of kin)
  - Fees and billing information as appropriate
  - Appropriate guardianship or conservatorship status where appropriate
  - Documentation of informed consent or assent for psychological support services (Ethics Code, Standard 3.10) (2.1 Of INSPA standards)
  - Documentation of waivers of confidentiality and authorization or consent for release of information (Ethics Code, Standard 4.05)
  - Documentation of any mandated disclosure of confidential information (e.g., report of child abuse, release secondary to a court order)
  - Presenting problem or basis for the request for psychological support services
  - Plan for services, updated as appropriate (e.g., treatment plan, supervision plan, intervention schedule, community interventions, consultation contracts)
  - Health and developmental history
4. The record may also include other specific information, depending on the circumstances and the practitioner's professional approach.
- Client responses or reactions to professional interventions
  - Any potential clinical signs and symptoms that may not be under the practitioner's competence
  - Other treatment modalities existing - pertaining to injury, any medication etc
  - Emergency interventions (e.g., specially scheduled sessions, hospitalizations)
  - Plans for future interventions
  - Information describing the qualitative aspects of the professional-client interaction
  - Assessment or summary data (e.g., psychological testing, structured interviews, behavioural ratings, client behaviour logs)
  - Consultations with or referrals to other professionals.
  - Case-related telephone and e-mail contacts
  - Notes related to coaches, parents, sport science support staff, and/or athlete managers
5. The follow-ups can include:
- Date of service and duration of session
  - Types of services (e.g., consultation, assessment, treatment)
  - Nature of professional intervention or contact (e.g., treatment modalities, online, offline, referral, letters, e-mail, phone contacts)
  - Formal or informal assessment of client status

### ***3.3 Developing Protocols to Protect and Store Client Data***

1. Along with the details, it is important to organise the data for ease of retrieval. For this, the practitioner can divide the information into sections. Psychological test data (assessments, questionnaires) may be secured in a separate encrypted file to ensure exclusive access for rightful purposes.
2. The practitioner will be held accountable for any damage to or loss of records. Hence, encryption is a practice that is advisable to protect the contents from electronic breaches. The practitioner is accountable for the accuracy and consistency of their records. Entries should be made after every session.

### *Data Storage & Access in Organisational Settings:*

1. The entries should be organised so as to facilitate their usage by those with the rights to do so. The task of record keeping may not always be the sole responsibility of the practitioner.
2. In cases where billing personnel, trainees, and other office staff are involved, record-keeping becomes a joint responsibility. This is important to establish before or while signing the contract with the academy or the team.
3. Training must be provided to practitioners so as to make them well versed with the ethical standards of maintaining confidential information regarding the clients.
4. While working with private organisations and government organisations, practitioners should ensure the electronic data like assessments and formal reports of the athlete are encrypted or stored in a safe place. The data would be the property of the organisation. However, the practitioner's personal notes and scribbled notes should be destroyed as soon as they enter the notes into the system. It is the practitioner's responsibility to ensure the system is encrypted and the data is secured.
5. Data transfer during the termination of contracts should be discussed beforehand. If the circumstances are in control, the practitioner should ensure a handover to the next practitioner in the organisation in case the contract is terminated. In case no practitioner is appointed, the encrypted data should be with the hiring organisation or as agreed upon in the contract.

### *Maintenance of Physical and e-Records:*

1. It is of paramount importance to keep the physical records in a safe location. (where they are protected from natural disasters and theft) Appropriate locking mechanisms have to be employed. A practitioner may consider keeping condensed copies of the records in separate locations in case of unforeseen damage to the original.
2. Similarly, electronic records would need to be safeguarded say from viruses, power outages and other malpractices. It is advisable to archive data, use system backups, and protect the files using passwords, firewalls, encryption, and data authentication. The protection methodologies need to keep the Ethical Standards in mind. The practitioner would need to be knowledgeable about the unique aspects of electronic record keeping such as disposal methods etc. They would be required to make a detailed analysis of the risks of electronic records. A risk assessment would help them to be aware of the potential dangers and avoid them.
3. When the situation requires the retention of records, it is important to have an appropriate rationale to support the retention. Moreover, the practitioner has to ensure that only the required information is released. In the absence of requirement, a practitioner may consider retaining all the records until 5 years, for adults, after the last date of service or 3 years after the minor becomes of age. There could, however, be special circumstances under which records might be retained for longer periods.
4. In a private or an organisational setting, a practitioner's records should be held securely for at least 5 years for as long as they are required for the purpose of psychological work. Practitioners must follow legal requirements, national and local policy frameworks and procedures regarding the retention or disposal of records after the practitioner's work is concluded. Practitioners should ensure that they keep up to date with requirements.

### 3.4 Developing Protocols for Client Data Sharing

1. Practitioners must bear in mind the potential impact of the information in their records on all who may have access to such records, for example, the client, other sport science professionals, athlete managers, sport coaches, etc. This guidance applies to all record-keeping on clients, their parents, and their organisations, regardless of the media in which information is held, e.g. written notes and reports, audio and video recordings, paper, and electronic records, etc.
2. Practitioners should be mindful at all times of the confidential nature of assessment materials. Many assessment measures are invalidated by prior knowledge of their specific content and objectives.
3. Practitioners who use these materials are required to respect their confidentiality and to avoid their release into the public domain (unless this is explicitly allowed in the nature of the instrument and by the test publisher).
4. Practitioners should, therefore, take reasonable steps to prevent the misuse of test data and materials by others.
5. Sharing data with third parties: A progress report is a document that shows the progress of the client athlete without breaking any kind of confidentiality. This report can be shared with parents, coaches, guardians, and associations in order to keep them in the loop regarding the progress of the client athlete. It can be shared periodically, whatever suits all the involved stakeholders. This can be discussed beforehand. The following parameters can be included in a progress report, bearing in mind client confidentiality and a non-judgemental attitude:
  - Needs analysis summary
  - Assessments worked on
  - Interventions worked on
  - Compliance of the athlete
  - Next steps or goals
  - Remedial measures for coaches/parents/medical support staff
6. The client athlete should be shown the report before it is shared with the third party.
7. When should the data be shared without seeking the consent of the client? A practitioner could break confidentiality only when:
  - A legal suit is filed against the client, and you need to be present at the court.
  - The court/lawyer demands notes and assessments
  - There is the possibility of the athletes harming themselves and taking steps that might be dangerous for them. (e.g., suicide, self-harm)
  - The client can be threatening to someone else (e.g. assault or planning to harm)
  - The client has questionable reasons for availing services such as to enable someone to commit a crime and to avoid detection or suspicion
  - The client discloses instances of child abuse, sexual assault, or any other form of violence that the practitioner is required to report. In these cases, the practitioner needs to involve the respective authorities. There is no choice in the matter of reporting
  - The client discloses that they have been using performance enhancers
  - The client discloses that they have been taking recreational/ psychotropic drugs

8. A practitioner can include these situations in their consent form in order to be clear on when they can break confidentiality with the client athlete. In order to understand what Protocols to follow during such situations, refer to [section 5](#) on safeguarding the professional and the profession

## **4. Practitioners should Consistently Maintain Professional Conduct**

### ***4.1 Disclosing Practitioner Education/Qualification(s)***

1. The disclosure of educational information by practitioners must be maintained and produced with integrity.
2. A practitioner must provide an information sheet/ document at the beginning of any professional relationship which includes professional and educational information.
3. A practitioner may only state, advertise and confirm educational qualifications that they have completed, are competent in, and that they have proof of.
4. If deemed necessary, the practitioner must be ready to show proof of completion. Education information disclosure is necessary in cases of specific skills, training and counselling.
5. While disclosing educational information, the emphasis of the practitioner should be on the client's best interest, establishing trust and rapport and not on self-promotion or exaggeration.

### ***4.2 Maintaining a Standard Working Pattern***

1. A practitioner's working hours must be in accordance with their own boundaries and capabilities.
2. If employed by an organisation, the practitioner must adhere to the work times set by that organisation.
3. If employing other practitioners, trainee practitioners or interns, paid or unpaid, the practitioner must ensure that their work times are fair and do not exceed the required time limits/ daily client limits.
4. Currently, the number of sessions that can be conducted by a practitioner per week is ~20. This is compiled through the average seen across the world.
5. The practitioner must schedule appointments with clients keeping in mind their best interests and availability. The practitioners may use their discretion to allocate appointments during a day, as long as the time decided upon is fair.
6. A practitioner should also devote sufficient time to keeping up with research and continuing their education and development.
7. A practitioner is also responsible for developing a healthy relationship by conducting the session at a culturally appropriate place, especially because athletes are usually available at non-traditional locations such as the academy, gyms or the academy cafeteria.
8. One should make sure the place the sessions are conducted are mutually agreed upon.

### ***4.3 Professional Fees***

1. As early as is feasible in a professional or scientific relationship, practitioners and clients reach an agreement specifying compensation and billing arrangements. Practitioners' fee practices are consistent with the norm.
2. Practitioners should not misrepresent their fees.
3. If limitations to services can be anticipated because of limitations in financing, this should be discussed with the clients as early as feasible.
4. If the client does not pay for services as agreed, and if practitioners intend to use collection agencies or legal measures to collect the fees, practitioners first inform the person that such measures will be taken and provide the client with an opportunity to make prompt payment. This can be made clear in the information sheet itself.

### ***4.4 Maintaining a Professional Conduct***

1. A practitioner must always remember that they are a professional, and any session conducted is within the boundaries of being professional, hence they must dress professionally.
2. Practitioners must ensure that their dressing is within the parameters of culturally appropriate dressing.
3. If employed by an organisation, the practitioner must adhere to that organisation's dress codes.

### ***4.5 Avoiding Developing Dual Relationships***

1. Dual relationships (e.g., same person being coach and sport psychologist) occur when a practitioner is in a professional relationship with the client and at the same time, is in another role with the client or with someone closely related to the client.
2. Practitioners may not enter into a professional relationship with a client if there are conflicting power structures outside the professional relationship. If the nature of the relationship is such that it may interfere with the therapy process and the therapeutic alliance, the practitioner must take reasonable measures to exit the business relationship. If a relationship of this nature cannot be avoided, the practitioner may refer the client to another competent practitioner.
3. In this case, the practitioner clarifies the nature of the conflict and attempts to resolve it in accordance with the Ethics laid out in this Code. The practitioner must aim to diffuse conflict keeping in mind the best interests of the primary client.
4. A practitioner must not enter into a sexual relationship with their client during the course of their work together, and up to 3 years after termination of their professional therapeutic relationship. A practitioner must also not enter into a sexual relationship with those that may be related to the client, or anyone with whom the sexual relationship might affect the process or outcome of therapy.
5. A practitioner may not enter into a romantic relationship with a client during the course of their work together and up to 3 years after termination of their professional therapeutic relationship. The practitioner may also not accept current romantic

partners as clients since this will lead to impairment of the professional relationship and objectivity of the practitioner, leading to a compromised process and outcome.

#### ***4.6 Professional Advertisements or Deceptive Statements for Marketing***

1. Avoidance of false or deceptive statements: Practitioners should not knowingly make public statements that are false, deceptive, or fraudulent concerning their research, practice, or other work activities or those of persons or organizations with which they are affiliated. Practitioners should not make false, deceptive, or fraudulent statements concerning:
  - their training, experience, or competence;
  - their academic degrees;
  - their credentials;
  - their institutional or association affiliations;
  - their services;
  - the scientific or clinical basis for, or results or degree of success of, their services;
  - their fees; or
  - their publications or research findings.
2. When practitioners provide public advice or comment via journalists, print, social media, internet, or other electronic transmission, they should take precautions to ensure that statements:
  - are based on their professional knowledge, training, or experience in accordance with appropriate psychological literature and practice;
  - are otherwise consistent with this Ethics and Code of Conduct; and
  - do not indicate that a professional relationship has been established with the recipient.
  - do not break confidentiality with the client.
3. What a practitioner advertises on their website and professional social media account should not break any confidentiality. For example, naming and posting a picture of the client you're working with, and writing testimonials with the client-athlete's name. If this is done, practitioners should obtain consent of the client.

#### ***4.7 Providing Referrals in Professional Work***

1. Practitioners must work within the boundaries of their training and ability to provide services as requested by their clients and consultees, according to the principle of benevolence and non-maleficence. If unable to comply, they can refer professional work to other agents, depending on the client's needs and/or cooperate with other professionals or institutions in the clients' best interest.
2. Practitioners must arrange appropriate referrals to competent practitioners when requested to work beyond their training or professional qualification and credentials. This may include but is not limited to, mental- and physical-health-related issues (e.g., eating disorders, clinical depression, etc.).



3. Practitioners should engage in any consultation with other professionals exclusively after informing the client about the need for and the nature of the consultation and obtaining the appropriate client's informed consent.
4. Practitioners should arrange appropriate consultations with other professionals when aspects which transcend their own training are involved.
5. Practitioners should refer clients to another practitioner in case of any circumstance that might compromise their objectivity, and/or competence, as well as in the case of the practitioner's impairment.

#### *4.8 Developing Protocols for Termination*

When terminating a professional relationship with a client, practitioners should take into consideration all the factors affecting the service delivery process, the personal aspects of the client's well-being, and the processes inherent in the services provided.

Practitioners may terminate the services :

- When a conflict of interest occurs, when the client or a third party threatens you, to preserve your privacy and the privacy and security of your family and employees, when clients refuse to comply or pay attention to the terms of the service delivery relationship, or when the client stops communicating with you or from contacting you, or if you have made clear to them the financial arrangements of the contract and they are not paying the outstanding balance.
- When it is reasonably evident that a customer no longer needs the service, no longer benefits from it, or could be harmed by continuing the service, the provider should end the service delivery relationship with that client.
- When they are unable to provide their clients with effective, competent, and ethical service, they terminate the service delivery relationship.

The practitioner may:

- Inform clients of the necessity for termination, take appropriate action to protect their safety, and help them discover solutions to maintain service continuity, including advantages and disadvantages of each.
- Plan the transfer to another practitioner in an ethical and legitimate way so that the required documents and procedures are carried out.

## **5. Practitioners should develop Protocols and Guidelines that try to Safeguard the Professional and the Profession.**

Practitioners should develop protocols during tricky situations that can be shared with the client and the third parties. INSPA understands that practitioners may find themselves in tricky situations or slippery slopes which can lead to violation of these codes of conduct. The following are some such situations that practitioners encounter, which are exclusively related to sport psychology practices. Some situations have been listed with common short protocols to help the practitioner deal with the slippery slope. Having said that, practitioners should prioritise developing detailed protocols for private practice as well as while working with an organisation. While working with the organisation, it is essential to ensure the protocols are developed and shared in the initial days of employment or if possible, while signing contracts.

### ***5.1 The Possibility of the Client/Athlete Harming Themselves and Taking Steps that might be Dangerous for Them. (e.g., suicide, self-harm)***

1. This can be high-risk situation. By obtaining (for extreme cases, without the consent) the consent of the client, the authorities or the guardians must be informed. In case the client is a minor, the guardians and parents must be informed without consent.
2. The client must be immediately referred to a psychiatrist or a clinical psychologist for further the treatment, depending on the gravity of the situation
3. A referral note must be shared with all stakeholders involved - for example, athlete, parents, guardians, and the psychiatrist.
4. Practitioners should not conduct any assessment that one isn't trained in - any clinical tests to show any disorders.

### ***5.2 The Client/Athlete can be Threatening to Someone Else (e.g. homicide, assault, or intent to harm)***

1. The above protocol can be followed on an immediate basis.
2. Over and above, while working with an organisation, one can also develop a safety protocol to protect the interest of other athletes in the residential setting or the academy.
3. If the athlete is a professional archer or a shooter, all licences and weapons should be seized, if found psychologically unfit in this capacity.

### ***5.3 The Client/Athlete Discloses Instances of Abuse on Campus***

1. Physical or sexual abuse needs a strong protocol to be followed
2. This protocol can be discussed with fellow support staff, medical officers, wardens, parents, guardians & the head of the academy or camp.
3. There should be clarity on who the practitioner and/ or athlete should first report to, i.e. police, director, officer of the games, chef de mission etc
4. As a reference, one can refer to the following protocols as suggested by sport organisations in India: Indian Olympic Committee, NIS Children Athlete Safeguarding ([links provided here](#))



#### ***5.4 The Client/Athlete Discloses that they have been Using Performance Enhancers.***

1. Understand the intent of the action.
2. Educate the athlete on the harms.
3. Let the athlete understand the repercussions of the action
4. Follow the guidelines that is published by authorities like NADA

#### ***5.5 While Working with Teams***

1. Ensure you inform authorities when you would be conducting individual sessions especially when you're away for a tour.
2. Avoid meeting athletes in an isolated location or at odd times.
3. Avoid social situations with athletes. e.g., social dinner, exercising together in the gymnasium, etc.

#### ***5.6 You've been Called to Speak for your Client/Athlete in a Legal Case***

1. One should share the required documents that are needed by the lawyers.
2. One must be upfront while sharing this with the client.



## 6. Practitioners should Develop an Informed Approach in their Practice that is Sensitive with regard to Anti-discrimination and Anti-oppression

### 6.1 Being Culturally Sensitive in your Practice

1. It is expected that all practitioners will have the necessary skills and abilities to work with all sections of the community. Practitioners need to be aware of stereotypical beliefs and assumptions that manifest in thinking about culture and ethnic groups. Each ethnic community has a distinct identity and religious focus may also vary within and across communities.
2. Practitioners need to understand the discrimination suffered by people from diverse and/or minority ethnic and religious backgrounds as a result of:
  - the interchangeable use of the term's caste, race, culture and ethnicity leads either to the perception of minority caste, race, culture and ethnicity as unitary or an assumption that knowing about these caste, race, culture and ethnicity solves the problem of equality, fairness and availability of services;
  - the maintenance of the colour-blind approach in service where 'one size fits all', resulting in a lack of formal recognition of the varied diverse needs as well as these needs being ignored, unacknowledged or assumed to be the same;
  - experiencing instances of indirect, subtle, or unintentional discrimination often called 'micro-aggressions' e.g., calling someone OBC without knowing the detail;
  - it would be expected that all practitioners should develop a productive working relationship with culturally and linguistically diverse groups by avoiding different types of biases and finding new ways (verbally and non-verbally) to build rapport and respect.
3. Practitioners should be aware of the impact of culture, caste, ethnicity and religion in assessment, formulation and intervention processes and the use of norm-referenced tests that do not include minority ethnic groups as part of their standardisation.
4. Practitioners should acknowledge their own ethnocentricity and potential underlying socially conditioned biases and prejudices.
5. In working with clients who hold a variety of values and religious and spiritual beliefs that maybe different from their own, practitioners should consider the following:
  - Practitioners should respect clients' values and spiritual beliefs and need to be mindful that their personal beliefs should not be an impediment to engaging with the client.
  - Spiritual beliefs are very often beneficial to the client's well-being and may be helpful to be incorporated into any intervention to achieve a positive impact where appropriate.
  - In some circumstances the client's faith and/or belief may be harmful or detrimental to themselves or others.

## ***6.2 Being Inclusive while Working with Sexual and Gender Minorities and LGBTQIA + Population***

1. Practitioners should be committed to the fair treatment and inclusion of people by developing a clear awareness of the differences between gender, identity, and sexuality.
2. Practitioners are encouraged to understand that attitudes towards sex, sexuality and gender are located in a changing social, cultural, and political context, and to reflect on their own understanding of these concepts and how it may impact their practice and reflect on the limits of their practice when working with certain sexual and gender minority clients, and to consider appropriate referral and training when necessary.
3. Practitioners should continue to strive for knowledge about the diversity of sexual and gender minority identities and practices and use the preferred language of the sexual and gender minority individuals (e.g., seeking client's pronouns).
4. Practitioners should be mindful of the intersections between sexual and gender minorities and socio-cultural/economic status and avoid attempting to change gender or sexual minorities on the basis that they can be 'cured' or because of stigmatising theory, personal, religious and/or socio-cultural beliefs.
5. When offering psychological services to the LGBTQIA+ population, it is imperative for a practitioner to understand a holistic background of the client.
6. The client can be affected by the way their ethno-culture community views and understands sex, sexuality, and gender. Sensitivity to the complex dynamics associated with factors such as cultural values about gender roles, religious and procreative beliefs, degree of individual and family acculturation, and the personal and cultural history of discrimination or oppression is also important.
7. All of these factors may have a significant impact on identity integration and psychological and social functioning.
8. Practitioners may refer to the guidelines developed by relevant organisations for working with gender minorities and the transgender community to ensure sensitivity in their applied practice.

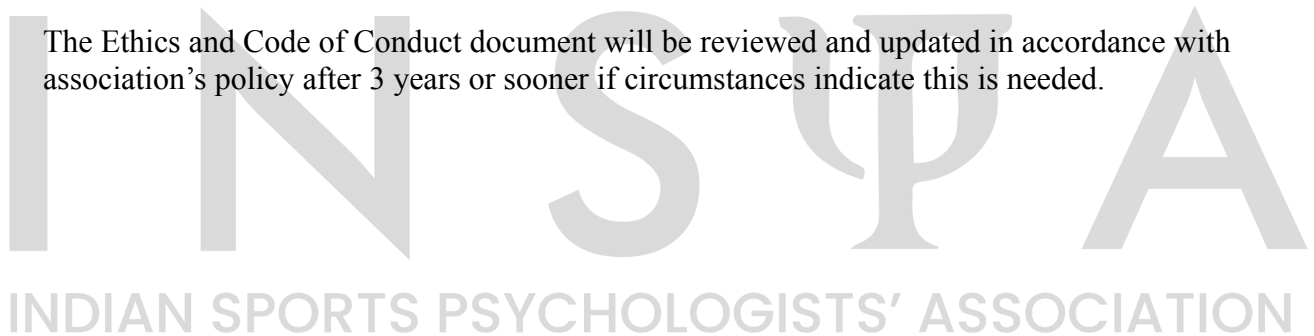
## How was this Document Developed?

In developing the Ethics and Code of Conduct document, the overall aim and scope of the document was considered at length, and the decision arrived at that they should be applicable to all practitioners (Sport Psychologists) in India irrespective of registration status or practice context. The guidelines have therefore been written in a way which it is hoped is inclusive of the various contexts of practice. Drawing the development work, the document aims to cover all the important considerations for practice. It is however recognised it cannot cover every circumstance and also that new issues arise which will require careful consideration by the individual practitioners.

The Ethics and Code of Conduct document development Working Group included Dr. Sanika Divekar, Varadayini Gorhe, Keerthana Swaminathan, and Mudit Krishnani. It also included representation from the founding members and the advisory board of INSPA and other members on specialist topics of practice. Recommendations have been included based on the working group consensus.

No member has received any form of remuneration in accordance with INSPA's working policy.

The Ethics and Code of Conduct document will be reviewed and updated in accordance with association's policy after 3 years or sooner if circumstances indicate this is needed.



## Bibliography and References

### Website(s) for Further Information

#### [Indian Sport Psychologists' Association](#)

The INSPA website has guidance, advice and further information on many topics not covered in this document as well as those mentioned.

#### [International Society for Sport Psychology](#)

The International Society of Sport Psychology (ISSP) is a multidisciplinary society devoted to promoting research, practice, and development in sport psychology throughout the world. The Society endeavors to foster peace and understanding among people from all countries. Members of the Society include researchers, psychologists, educators, coaches, administrators, students, and athletes interested in sports psychology.

#### [Indian Olympic Committee Safeguarding](#)

#### [Guidelines for NADA \(drug usage\)](#)

#### [Indian NIS children's Safeguarding](#)

#### [APA guidelines on working with gender minorities](#)

#### [BPS \(2019\) guidelines on working with gender minorities](#)

*Team INSPA*