Professional Impairment

BACKGROUND

Impaired functioning is a problem for workers at all levels of our society. Although the exact number of workers impaired because of substance use disorders, mental dysfunction, and other stressors is unknown, it is estimated that at least 20 percent of all workers suffer from some type of impairment at any given time (NASW, 1987b). Although substance abuse is cited as the most frequent cause of impairment, other recognized etiologies include psychological stresses due to aging, physical illness, financial hardship, extreme working conditions, marital and family difficulties, as well as chronic psychological disorders (Philip, 1993; Quadrio, 1992; Sherman, 1996). There are many definitions of professional impairment, but all cite an interference in functioning and deficits in work performance as a result of the aforementioned causal factors (Boxley, Drew, & Rangel, 1986; Lamb et al., 1987). Impaired functioning should be distinguished from incompetence by evidence that the worker has previously functioned acceptably according to standards of practice. Also, there must be a relationship between the worker’s behavior and substance use disorders, personal stress, psychological dysfunction, or other excessive emotional reactions (Haas & Hall, 1991).

Because social workers are no different from the rest of the population, the incidence of alcoholism, acute and/or life threatening illnesses, divorce, depression, and other problems among them should approximate the rates of the general population (Haas & Hall, 1991). However, existing evidence in other fields suggests that social workers, like psychologists, physicians, and other related professionals, may experience even more distress than the general public (Guy, 1987; Houston-Vega & Nuehring, 1997). These findings are not surprising because social workers work daily with inadequate resources and very difficult clients and in situations that often change erratically and slowly. The suicide rate of social workers younger than age 65 is significantly greater than that of the general population in that age group (American Medical News, 1987). Although personal and environmental stress may not always result in impairment, it is likely that the existence of these stressors places social workers at high risk of impairment. Some studies have also reported that 10 percent to 15 percent of social workers have some type of substance use disorder and approximately half of all social workers have seen other social work colleagues who they believe to have alcohol or drug problems (Elpers, 1992; Fitzgerald, 1983; Hiratsuka, 1994).

Social work, like many other professions, has spent relatively little time or resources acknowledging or addressing the needs of colleagues who are impaired. Formal professional actions related to identifying and assisting social workers with impairments have only been seen within the past two decades. First, statewide chapters of NASW began to establish programs to address the needs of their colleagues who are impaired. Beginning in 1978, three chapters, New York City, New York State, and New Jersey, published materials and established services for colleagues suffering from alcoholism and alcohol-related problems. These three chapters were also instrumental in preparing a national policy statement on this issue that was approved by the Delegate Assembly in 1979. In 1980, Social Workers Helping Social Workers (SWHSW) was formed.
to provide mutual support and to assist others with impairment and related problems. The program is currently available to all social workers with a master’s degree and to a master’s of social work degree candidates who have experienced alcoholism in their own lives or in those of family members.

However, it was not until 1982, under leadership of the newly appointed National Occupational Social Work Task Force, that the plight of social workers with impairments began to receive some national attention. Chapters in Connecticut and Texas were awarded grants from the NASW Practice Advancement Fund to review guidelines for establishing programs to assist social workers with impairments (for these guidelines and chapter activities, see NASW, 1987b). Because of the efforts of the task force and its successor, the Occupational Social Work Planning Committee, the 1984 Delegate Assembly passed a nonbinding resolution that called on NASW to endorse and encourage chapters’ efforts to address the problems of their members with impairments. The resolution stated that NASW should provide technical assistance and other resources to assist chapters in developing and implementing programs for practitioners who are impaired (NASW, 1984). Following the lead of other national and local professional health associations, including the American Dental Association, the American Medical Association, the American Nursing Association, the American Pharmaceutical Association, and the American Psychiatric Association, NASW finally adopted a national policy statement on professional impairment, entitled “A Colleague-Assistance Program,” at its 1987 Delegate Assembly (NASW, 1987a). This policy, renamed “The Impaired Professional,” was reconfirmed by the Delegate Assembly in 1993. NASW’s Commission on Employment and Economic Support also published a resource book aimed at assisting practitioners in designing programs for colleagues with impairments (NASW, 1987b). Finally, in 1994 NASW added three sections on professional impairment to its Code of Ethics, which were expanded in its 1996 revision (NASW, 1994, 1996, 1999).

Despite the recent increased attention and organized efforts directed toward the problem of professional impairment, there is still much work to be done in this area. There is insufficient information about both the prevalence of impairment among practicing social workers and the treatments that will most effectively restore professionals to acceptable functioning levels. In addition, responses to professional impairment must be re-examined as many established programs have reached very limited numbers of workers and hence have ceased operations. There are also no texts or resource guides solely dedicated to the issue of the professional impairment of social workers available through NASW Press or other publishers.

**ISSUE STATEMENT**

Professional impairment among social workers is an important issue to address for a variety of reasons. First and foremost, social workers suffering from substance use disorders, psychiatric stresses and disorders, and other causal factors of impairment may compromise performance that jeopardizes the rights of their clients and the effectiveness of the treatment provided. The ability of social workers to perceive situations clearly and objectively is pivotal to their work. However, social workers who are impaired by personal problems are not able to use their key skills effectively. Although research on the impairment of social workers is limited, findings in related fields suggest that it is likely that the psychological states of social workers are also directly related to the outcomes of their clients (Garfield & Berger, 1971; Pope, Tabachnick, & Keith-Spiegel, 1987). In addition, social workers practicing while impaired are at greater risk of unethical conduct and malpractice (Houston-Vega & Nuehring, 1997; Roswell, 1988).

Professional impairment in social work is also important because of its impact on the profession in general. Although all misconduct is not the result of impairment, highly publicized cases of unethical actions caused by impairment portray social workers in an embarrassing light, damaging the reputation of the profession and causing questions to be raised about the competence of the profession overall.
The issue of impaired practice presents real dilemmas and challenges for the profession that is compounded by the lack of guidance on this issue from regulatory boards and professional organizations. Clients who are affected most by impaired performance generally do not recognize it. Unfortunately, many social workers avoid “interfering” in the lives of their troubled colleagues, despite the ethical mandate to intervene (NASW, 1996). A 1992 study of NASW members indicated that the majority—41 percent—were uncertain about reporting, while 36 percent favored reporting and 23 percent were against reporting (Elpers, 1992). Unfounded beliefs that intelligence, education, and occupation can exempt someone from these societal problems may be barriers to the identification of impairment among social work colleagues. In addition, social workers are fearful about colleagues’ reactions to their confrontation and its effect on their future working relationships, making practitioners reluctant to intervene even when they suspect impairment of their colleagues (Reamer, 1992). Finally, a lack of recognition of their problems makes it unlikely that professionals who are impaired will self-initiate appropriate actions such as seeking treatment, making adjustments in workload, terminating services or practices, and/or other steps necessary to protect clients.

It is unrealistic to expect social workers, simply because they help others, to know how to deal with all their own problems. They too may need assistance coping with issues related to health, employment, relationships, finances, substance abuse, and so forth (Reamer, 1994). The social work profession must address the needs of its members and protect the welfare of its clients. The issues related to professional impairment must be addressed carefully. Just as social workers avoid blaming their clients for the problems they encounter, they must also resist blaming their colleagues for these same troubles. Addressing the issues that arise from the identification and treatment of impairment will certainly be difficult for social work professionals who have, as a whole, historically denied their vulnerability. However, it is essential for a profession that has so valiantly met the needs of others to now focus its energies on the plights of its own with the same conviction, energy, and efficacy that has been its hallmark.

**POLICY STATEMENT**

NASW recognizes that the prevention, identification, and treatment of professional impairment is vital to protect the welfare of clients, practicing social workers, the work environment, and the integrity of the profession. A multisystemic approach must be used to address professional impairment among social workers and policies to address this issue must be focused on prevention, identification, and treatment.

**Prevention**

Although treatment is important, prevention efforts may spare clients the potential harms that result from receiving services from professionals with impairments. Prevention may also avert some instances of unethical conduct and/or illegal actions by social workers who are impaired. First, awareness must be raised among social workers about the existence and effects of professional impairment. This education is especially critical for social work students before they begin practice. Recognizing that preventative education is a critical, and the most essential, element of any comprehensive effort to address professional impairment, NASW urges that:

- social work education programs incorporate material about student and professional impairment, and ethical responsibilities related to impairment, into their coursework. This material should include at a minimum the identification of risk factors associated with professional impairment, the characteristics of impaired functioning, the strategies available for approaching and assisting colleagues believed to be impaired, the treatment and other options available for professionals with impairments, and the ethical obligations of social workers with regard to professional impairment.

- continuing education offerings on professional impairment be developed, offered, and mandated for social workers within each state.
and that regulatory boards and professional organizations work for the inclusion of the topic within mandatory continuing education offerings.

- individual and group support be available for both social work students and practitioners as a means to discuss job site and work stressors that may lead to the physical and psychological problems often found among those employed in social work settings.
- agencies that employ social workers support the human services mission and ensure that working conditions are conducive to services delivery in an effort to minimize environmental stress which places them at-risk of impairment.

Identification and Treatment

It is imperative that confidential and non-punitive treatment options be available on demand to social workers who are impaired. These treatment options must be aimed at identifying and assisting social workers in returning to competent functioning. To achieve this aim, NASW encourages the establishment of colleague-assistance programs that confidentially help to identify colleagues with impairments, encourages them to obtain treatment, identifies appropriate treatment options available, and facilitates integration back into the workplace upon recovery. NASW also supports similar policies for the identification and treatment of social work students who are impaired. NASW urges organizations that employ social workers to ensure that:

- insurance benefits are provided that make access to treatment services possible
- nonpunitive, rehabilitative practices concerning professional impairment are established and enforced by employers, regulatory boards, schools of social work, and other professional organizations
- clients are aware of ways in which they can report poor practice or violations of their rights, including those resulting from professional impairment.

On a macro level, NASW recognizes the need for:

- additional research on professional impairment, including research in the areas of prevention, assessment, and treatment
- civil immunity laws that protect those who report colleagues believed to be impaired.

REFERENCES


National Association of Social Workers. (1984). Distressed social workers (Resolution No. 21,
Policy statement approved by the NASW Delegate Assembly, August 1999. This policy statement supersedes the policy statement on The Impaired Professional approved by the Delegate Assembly in 1987 and reconfirmed by the Delegate Assembly in 1993. This policy statement was previously titled A Colleague-Assistance Program. For further information, contact the National Association of Social Workers, 750 First Street, NE, Suite 700, Washington, DC 20002-4241. Telephone: 202-408-8600; e-mail: press@naswdc.org