ATHABASCA UNIVERSITY

A CALL FOR CANADIAN GRADUATE PROGRAMS IN PSYCHOLOGY TO DEVELOP FORMALIZED GATEKEEPING PROCEDURES

by

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DEDICATION

For Frank, my incredible husband, and Abigail, my amazing daughter. And for those who believe that in order to heal, we must be well.
ABSTRACT

Despite the existence of student impairment, most Canadian graduate programs in psychology currently lack formal policies for the identification, evaluation, remediation, and dismissal of problematic students. Definitional difficulties aside, the profession is ethically and legally obligated to intervene when students demonstrate impairment. Although programs perceive a number of obstacles to implementing gatekeeping procedures, a review of the literature confirms that developing and implementing written policies is the only way to ensure that students, faculty members, programs, the profession, and the public are protected from impaired graduates. Recommendations for policy development are discussed.
ACKNOWLEDGEMENTS

Each of us has cause to think with deep gratitude of those who have lighted the flame within us - Albert Schweitzer. Many, many people have lighted, and fanned, the flame of this journey, and I need to express my profound gratitude. The first inkling for this project first began to flicker after a rather heated debate with Dr. Tom Strong during an ethics class. Thank you, Dr. Strong, for playing devil’s advocate to my naiveté, and for encouraging me to believe that my love for all things ethical could be more than personal. Dr. Paul Jerry then encouraged me to engage in this debate on a more professional level. I can still get on quite a tirade about professional fitness, but I now have the research to back me up – thank you Paul. To my friends, family, peers, and colleagues – people on both sides of this fence who were willing to share their opinions and perspectives with me – thank you. You saved me from tunnel vision. To my wonderful family – thank you. For taking over the childcare duties, for making breakfast, lunch, and dinner, for phoning to check in on me, for not phoning too often, for allowing me to hermit in the basement, and for being there when I emerged… I am forever grateful. My lovely daughter Abigail – you truly are my special girl and I love you beyond the moon. Finally, my amazing husband Frank – tears come to my eyes when I think of all you’ve sacrificed in order to encourage and support me in this. “Thank you” doesn’t seem sufficient. I could not have done this without you. You are my life, my love, my dear, and the love of my life… always.
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A Call for Canadian Graduate Programs in Psychology
to Develop Formalized Gatekeeping Procedures

The development and observance of professional standards, designed to both ensure
competence and protect the public from harm, are “considered a hallmark of a mature
profession” (Pettifor, 2007, p. 302). To be sure, Canadian psychologists are subject to a
number of professional standards. The Canadian Psychological Association’s (CPA)
*Canadian Code of Ethics for Psychologists* (2000) and the Canadian Counselling
Association’s (CCA) *Code of Ethics* (2007) represent the primary ethical codes relevant to
the practice of the psychology in Canada. In addition, Canadian psychologists are subject to
the legislation, standards of practice, and professional guidelines of the province or territory
in which they practice (Phillips, 1982).

At their foundation, codes of ethics establish a set of principles for psychologists to
honour as they navigate their professional duties (Fisher & Younggren, 1997). In addition,
they provide the means through which the profession can monitor and, if necessary,
discipline its members (Pettifor, 2004). Our ethical codes, in combination with the statutes
and regulations governing the profession of psychology, constitute our contract with the
public. They serve to define and establish our identity as a profession; they promote
competent, responsible, and appropriate teaching, research, and practice from agents of that
profession; and they encourage public trust (Jordan & Meara, 1990; Pettifor, 1998, 2007). It
is only with the public’s confidence and trust that our profession can continue to grow and
prosper (Johnson, Porter, Campbell, & Kupko, 2005).

As public demand for accountability from psychological service providers has
increased (Rodolfa et al., 2005), it is incumbent upon the profession to ensure practitioners
are indeed competent, responsible, ethical, effective, and appropriate ambassadors for the discipline of psychology. We are compelled to be gatekeepers for our profession. As entry to the profession requires a graduate degree (Hall & Lunt, 2005), it seems reasonable for gatekeeping to begin in graduate programs in psychology.

Unfortunately, graduate programs in psychology in Canada are sorely lacking the formal means to identify or evaluate students who are not fit for the profession (Elman & Forrest, 2004; Forrest, Elman, Gizara, & Vacha-Haase, 1999; Huprich & Rudd, 2004; Procidano, Busch-Rossnagel, Reznikoff, & Geisinger, 1995; Vacha-Haase, 1995; Vacha-Haase, Davenport, & Kerewsky, 2004). Academic gatekeeping policies ensure that graduates have the requisite psychological knowledge necessary for practice; however, becoming an effective, competent, and responsible psychologist does not depend solely on academic achievement.

Interpersonal skills, professional judgement, and appropriate attitudes and values are integral components of an ethical, fit, and conscientious practitioner who will safely and competently serve the public (Bemak, Epp, & Keys, 1999; Johnson & Campbell, 2002, Kerl, Garcia, McCullough, & Maxwell, 2002; Schoener, 1999). When students do not demonstrate these qualities – indeed, when they display an inability or unwillingness to achieve these professional standards – intervention is required. Unfortunately, the difficulties and discomfort that the profession encounters when addressing impairment of professional psychologists (Good, Thoreson, & Shaughnessy, 1995; Floyd, Myszka, & Orr, 1998; Olsheski & Leech, 1996; Wood, Klein, Cross, Lammers, & Elliott, 1985) have also permeated academic programs (Morrissette, 1996; Vacha-Haase et al., 2004).

Twenty-five years ago, Biaggio, Gasparikova-Krasnee, and Bauer (1983) declared
that the profession of psychology was “long overdue in... critically examining issues relating to evaluation of clinical students and procedures for dealing with the unsuitable student” (p. 20). Since then, calls for graduate programs in psychology to implement formal gatekeeping policies have been extensive (Bemak et al., 1999; Brady & Post, 1991; Busseri, Tyler, & King, 2005; Elman & Forrest, 2004; Enochs & Etzbach, 2004; Forrest et al., 1999; Frame & Stevens-Smith, 1995; Gaubatz & Vera, 2002, 2006; Gizara & Forrest, 2004; Hensley, Smith, & Thompson, 2003; Huprich & Rudd, 2004; Johnson & Campbell, 2002, 2004; Jordan, 2002; Kaslow, 2004; Kerl et al., 2002; Kitchener, 1992; Koerin & Miller, 1995; Knoff & Prout, 1985; Lamb, Cochran, & Jackson, 1991; Lamb, 1999; Lumadue & Duffey, 1999; Oliver, Bernstein, Anderson, Blashfield, & Roberts, 2004; Vacha-Haase et al., 2004). Unfortunately, the idea of non-academic gatekeeping appears to fill counsellor educators with fear and uncertainty, resulting in a discomforting absence of formal gatekeeping policies to address student impairment.

This project is designed to highlight the irrefutable need for Canadian graduate programs in psychology to develop formal gatekeeping policies to address the performance and development of students who are experiencing problems outside the traditional academic realm. A review of the literature regarding impairment will include impaired psychology, medical, and social work students, as all three professions share similar program requirements; that is, academic coursework, clinical performance, and the ability to interact appropriately with the public (Dar, Moore, & Snyder, 2003; Olkin & Gaughen, 1991). This literature review will reveal the difficulty inherent in defining, identifying, and evaluating what may constitute impairment, and the resulting challenges in addressing impairment through formal policies and procedures.
However, an examination of the literature will also reveal the persistent and pervasive problem of student impairment, and the considerable negative consequences of allowing impaired students to continue in their programs. Educators have both ethical and legal obligations to address impairment within their programs. Current gatekeeping models will be reviewed, and recommendations will be offered for the development of such policies within Canadian graduate programs in psychology.

*Dealing with Terms and Definitions*

In order to discuss the issue of student impairment, appropriate terminology and comprehensive definitions are necessary. However, determining which terms to use in the discussion of impairment is a task fraught with difficulty, dwarfed only by attempts to define impairment. Identifying a student who is struggling with the academic coursework required in a graduate psychology program is quite a simple matter. Students must incorporate a specific body of knowledge directly pertaining to the theory and practice of psychology, and give evidence of that incorporation, through assignments, examinations, or both. Standards of acceptable knowledge levels are determined beforehand, and are used to evaluate student submissions. Discussion about a student’s level of mastery is also relatively simple. Students who succeed in reaching superior levels of knowledge in their academic coursework are referred to as “A” students, those who are less successful at incorporating the necessary knowledge are referred to as “C” students, and so on.

However, identifying a student who is struggling with the interpersonal or behavioural expectations of a graduate psychology program is far more difficult, for a number of reasons. First of all, despite a recent shift in focus toward clarifying what is necessary for professional competence (Falender & Shafranske, 2007; Hensley et al, 2003;
Kaslow, 2004; Kaslow et al., 2007; Roberts, Borden, Christiansen, & Lopez, 2005; Rodolfa et al., 2005), the discipline of psychology has yet to formally agree on what specific personal characteristics and interpersonal behaviours are necessary and, conversely, what traits or behaviours are unacceptable for the study and practice of psychology (Bemak et al., 1999; Beutler, Crago, & Arizmendi, 1986; Donati & Watts, 2005; Pope & Kline, 1999).

Lack of agreement on what constitutes the substance of impairment has carried over into the terminology used to describe it, and has thwarted many gatekeeping efforts. Directors of professional psychology training programs in Canada have identified the need to address the presence of impaired students as a high priority within their programs (Alden et al., 1996). However, without an agreement on even the terms and definitions for acceptable standards of interpersonal behaviour or personality characteristics, gatekeeping attempts are destined to remain at the research level (Elman & Forrest, 2007; Forrest et al., 1999).

Terminology

Historically, students who possessed academic ability but lacked clinical skill or psychological fitness were deemed unsuitable or inadequate (Biaggio et al., 1983; Bernard, 1975; Boxley, Drew, & Rangel, 1986). Other terms, such as deficient (Gaubatz & Vera, 2002, 2006) unfit (McAdams III, Foster, & Ward, 2007), distressed (Frame & Stevens-Smith, 1995; Vacha-Haase et al., 2004), and incompetent (Busseri et al., 2005; Custer, 1994) have been used to describe those students whose personal development interferes with their ability to competently conduct themselves as professionals. They have also been described as suffering from personal or character limitations (Bemak et al, 1999; Bhat, 2005, Lumadue & Duffey, 1999), or as being without moral character or personal or psychological fitness (Johnson & Campbell, 2002). The term impairment is the single most common term used
throughout the gatekeeping literature to describe students who experience difficulties in either their personal or professional development (Bradey & Post, 1991; Emerson & Markos, 1996; Forrest et al., 1999; Frame & Stevens-Smith, 1995; Huprich & Rudd, 2004; Kutz, 1986; Lamb et al., 1991; Mearns & Allen, 1991; Schoener, 1999; Wilkerson, 2006).

However, the term impairment is feared to have legal implications for graduate schools wishing to initiate probationary periods or dismissal proceedings, as both Canada and the United States have laws endorsing accommodation for those with disabilities (Falendar, Collins, & Shafranske, 2004). As such, terms such as problem or problematic students (Olkin & Gaughen, 1991; Rosenberg, Getzelman, Arcinue, & Oren, 2005; Vacha-Haase et al., 2004), professional impairment (Oliver et al., 2004) and professional deficiency (Gaubatz & Vera, 2002, 2006; Procidano et al., 1995) have been suggested, to differentiate between a disability and the specific interpersonal difficulties that hinder professional conduct. A review of the relevant legal cases reveals that the legal issues regarding student dismissals for problematic behaviour do not rest on the terminology used, but on whether due process is followed (Cobb, 1994). Still, recent recommendations include a shift from impaired to professional competence problems (Elman & Forrest, 2007). In an attempt to prevent confusion between the bulk of the literature on this subject and the present discussion, the terms impaired and problematic will both be used herein to refer to specific behaviours that negatively affect a student’s ability to function appropriately within the professional realm of psychology.

Definitions

The struggle for appropriate terminology is further complicated by the lack of consensus on exactly what constitutes interpersonal difficulties, or problematic behaviours.
However, without clarification on this issue, any attempts at developing and implementing formal gatekeeping policies directed at these non-academic issues are futile (Kutz, 1986). A review of definitional attempts through the gatekeeping literature reveals both wide-ranging declarations, aimed at defining impairment as a result of its effect on personal and professional functioning, as well as specific behavioural symptoms that would indicate impairment.

In the past, the designation of impairment in graduate psychology students was used to describe a range of situations, from diagnosable psychotic conditions to the mere disapproval of a program’s director. For example, Bernard (1975) described the problematic student as an individual who was either a “sociopath, severely neurotic…psychotic… [or] personally warped” (p. 276). As the profession increased its attention in this area, general definitions of impairment began to focus on whether the particular problematic behaviour interfered with the student’s ability to adequately perform his or her academic and clinical responsibilities, appropriately engage in the therapeutic process, and behave in ways that are not harmful to clients, faculty, peers, or family (Bemak et al., 1999; Bernard & Goodyear, 2004; Boxley et al., 1986; Emerson & Markos, 1996; Jordan, 2002; Procidano et al., 1995).

Furthermore, regulated bodies of the profession indirectly define impairment through standards of appropriate practice. For example, the College of Alberta Psychologists advises professionals, in Section 14(1) of its Standards of Practice (2005), to refrain from practicing psychology when judgement is impaired “due to mental, emotional or physiological conditions or as a result of pharmacological or substance abuse.” Lamb et al. (1987) offered perhaps the most comprehensive, and certainly the most referenced, definition of impairment, describing it as:
an interference in professional functioning that is reflected in one or more of the following ways: (a) an inability and/or unwillingness to acquire and integrate professional standards into one’s repertoire of professional behavior, (b) an inability to acquire professional skills in order to reach an acceptable level of competency, and (c) an inability to control personal stress, psychological dysfunction, and/or excessive emotional reactions that interfere with professional functioning. (p. 598)

Building on the idea that impairment may be defined through evidence of diminished functioning, Gizara and Forrest (2004) found that clinical supervisors of psychological trainees focus on three central, evaluative themes to determine whether a student’s behaviour could be considered impaired: Was the behaviour harmful or deficient, did it represent a pattern, and was it resolving with time or intervention?

Some authors envision problematic behaviours and impairment on a continuum (Wilkerson, 2006) with psychological fitness (Johnson & Campbell, 2002, 2004), or competence in interpersonal functioning, critical thinking, and self-assessment (Kaslow, 2004; Kaslow et al., 2007) at the opposite end of impairment. These definitions obviously allow for a significant amount of personal interpretation. However, they highlight the importance of considering the consequences of a specific behaviour when evaluating the presence of impairment.

In addition to the general characterizations of impairment, many authors have offered concrete examples of symptoms that point to the existence of impairment. Psychopathology, poor judgement, immaturity (Biaggio et al., 1983), mental illness, personal conflict (Laloiotis & Grayson, 1985), personality disorders, emotional or social problems, marital problems, physical illness (Boxley et al., 1986), burnout, depression, substance abuse, vicarious trauma,
temporary emotional imbalance (Emerson & Markos, 1996), personality issues, deficient interpersonal skills, a lack of self-awareness and/or empathy, inappropriate sexual involvement, and a lack of knowledge, skills, and/or competency (Jordan, 2002; Rosenberg et al., 2005) have all been acknowledged as symptoms, or evidence, of impairment. A lack of interpersonal skills, characterized as the inability to maintain appropriate boundaries, exercise social judgement, and demonstrate self-awareness (Kaslow, 2004; Mearns & Allen, 1991; Roach & Young, 2007) are also often cited as being symptomatic of impairment.

Mood disorders, inappropriate anger, anxiety, eating disorders, a lack of appropriate interpersonal boundaries, cynicism, Axis II disorders as diagnosed by the American Psychiatric Association’s (2000) Diagnostic and Statistical Manual of Mental Disorders (Enochs & Etzbach, 2004; Oliver et al., 2004), interpersonal sensitivity, narcissistic idealization, the inability to refrain from parenting the client, and the exploitation of a counselling session to promote a dogmatic or prejudicial personal agenda (Bemak et al., 1999) have also been characterized as indications of impairment. Based on their comprehensive definition of impairment, Lamb et al. (1987, 1991) differentiated between normal developmental deficits and impairment by isolating characteristics specific to impairment. For example, the behaviour can be construed as problematic if it requires an inordinate amount of faculty attention and is persistent despite feedback. The student may be classified as impaired if he or she consistently fails to function competently as a result of the behaviour and does not address the problem despite feedback. However, counsellor educators are cautioned to differentiate between impairment, on the one hand, and behaviours, attitudes, and values, on the other, that are simply consistent with student development (Kaslow, Mitnick, & Baker, 2002).
While there is yet to be acceptance of a single, unifying definition of impairment within the gatekeeping literature, there is undoubtedly concern over certain problematic behaviours, attitudes, and values of graduate students of psychology. For the purpose of this discussion, impairment will refer to deficits – whether mental, physical, emotional, or educational – that interfere with a student’s ability to interact appropriately with peers, faculty, and clients. These deficits could range from a lack of personal awareness to a substance abuse problem, and from an Axis II disorder to an inability to incorporate psychological knowledge. The primary focus in determining impairment is to determine the student’s ability and/or willingness to develop into an effective, ethical, and conscientious professional.

*Impaired, Unethical, or Incompetent*

Lest the above discussion is not sufficiently ambiguous, there is also debate within the literature over whether the definition of impairment should be expanded to include incompetent or unethical behaviour. Do unethical acts automatically indicate impairment? If a student exhibits a skill deficit, does that indicate incompetence, impairment, or both? Conversely, if a student is suffering from personal distress, can she or he function professionally? Further questions arise regarding the utility of distinguishing between an impairment resulting from a recent deterioration of a previously acceptable level of functioning, or an inability to reach an appropriate level of professional functioning (Kutz, 1986). For example, incompetent behaviour can be simply a skill deficit. However, it is possible for psychological problems and a lack of character fitness to lead to incompetent practice (Johnson et al., 2005). Furthermore, incompetent practice can lead to client harm, making it unethical behaviour as well (Kitchener, 1992). Should skill deficits or unethical
behaviour be considered impairment simply because they are sometimes the result of personal problems, or are they all problematic behaviours requiring attention?

While the extent of this debate is beyond the scope of the current discussion, it is important to note that differentiating between incompetent, unethical, and impaired behaviours may be a beneficial exercise when determining appropriate intervention, remediation, or discipline strategies for such behaviour (Forrest et al., 1999; Gizara & Forrest, 2004; Kutz, 1986; Lamb, 1999; Orr, 1997; Rosenberg et al., 2005). Though distinctions like these may assist those responsible in selecting individually appropriate and effective remediation options for the impaired student, they are not required to establish the need for graduate programs in psychology to develop and implement formal policies and procedures to address student impairment. As Emerson and Markos (1996) so succinctly emphasized, “preventing harm to clients is paramount, whether the cause is impairment, incompetence, or bad judgement” (Definitions, ¶ 3). Regardless of terminology or definitional ambiguity, the time has come to address student impairment.

Rationale

In the literature, numerous calls have been made for graduate training programs to address the problematic behaviours of their students through formal gatekeeping policies. Notwithstanding these calls, there is a scarcity of such policies in Canadian graduate programs in psychology (Bradey & Post, 1991; Forrest et al., 1999; Huprich & Rudd, 2004; Vacha-Haase, 1995; Vacha-Haase et al., 2004). Is this lack of attention toward the impairment of students justified? Regarding the necessity of developing formal policies to manage the impaired graduate student, three central concerns emerge for graduate programs in psychology to consider.
The first issue is whether the frequency and extent of the problematic behaviours graduate students of psychology experience are serious enough to warrant such policy development. Frankly, are there enough problematic students to merit an institutional response? The extensive debate over a definition of impairment, as well as the absence of a common terminology, clearly highlights the lack of, and need for, focused attention in this area. Moreover, surveys and studies of graduate programs in psychology and their students indicate that student impairment is, indeed, a pervasive problem requiring institutional attention.

Secondly, are gatekeeping procedures necessary? This issue is rooted in the uncertainty over whether graduate schools have an ethical responsibility to ensure that their graduates are able provide competent, ethical, and responsible care for future clients. Is there any way in which graduate programs in psychology are obligated to protect the public from impaired graduate students? Indeed, a review of the ethical guidelines for Canadian psychologists and accreditation requirements for Canadian psychology programs confirms that graduate programs in psychology are required to address student impairment.

The third matter requiring consideration pertains to the academic gatekeeping procedures already in place in graduate programs in psychology, and whether those evaluative policies adequately address student impairment. In attempting to produce competent, ethical, and responsible practitioners of psychology, are the current academic standards sufficient, or is a non-academic component required to attain professional competency? Unfortunately, despite heavy reliance on traditional academic criteria and evaluation, in the admission process as well as throughout most programs, these assessments do not adequately detect problematic behaviours that may impede professional functioning.
Impairment does exist, and it is a pressing concern for directors of graduate school programs (Alden et al., 1996). Indeed, educators are ethically obligated to intervene when students exhibit problematic behaviours (Bhat, 2005). Moreover, current program standards do not sufficiently address student impairment (Markert & Monke, 1990), as a result of which graduate programs in psychology should have formal policies and procedures in place to address this issue.

Yet, a majority do not (Forrest et al., 1999). Many programs anticipate a number of barriers to developing and implementing such policies, such as fear of student-initiated litigation, faculty discomfort with their evaluative role, and the difficulty inherent in developing a policy without a consensus on definitions and terminology. However, a review of the gatekeeping roles and responsibilities of counsellor-educators reveals that each of these potential roadblocks can be reconciled through the development of the very policies educators are hesitant to develop.

For example, an examination of the relevant legal cases reveals that the existence of formal gatekeeping policies actually increases the likelihood that dismissals based on problematic behaviours are legally supported. Furthermore, by including faculty responsibilities in the formal gatekeeping policies, counsellor-educators increase their comfort with the evaluative role. Finally, a review of current gatekeeping models reveals a number of gatekeeping templates that may be individualized for each program, allowing them to bypass entirely the need to develop such policies on their own.

The final consideration for whether a graduate psychology program should develop specific policies to address impaired students is the ultimate utility of such policies. The amount of time, effort, and collaboration required to both develop formal policies, and to
educate faculty members, supervisors, and students regarding the new policies would be substantial. Is there evidence that such formal policies would prove beneficial for psychology training programs and their students in addressing student impairment?

Indeed, a formal gatekeeping policy is the most effective way to prevent impaired students from inflicting harm on peers, faculty, and clients, and from graduating to become impaired professionals (Gaubatz & Vera, 2002; 2006; Hensley et al., 2003; Johnson et al., 2005; Lumadue & Duffey, 1999; Kerl et al., 2002). It is the premise of this discussion that graduate schools of psychology have an ethical and legal obligation to protect the public from impaired students. Furthermore, as any perceived challenges are resolvable, as impairment is a serious problem, and as gatekeeping policies are the most effective means by which to prevent impaired students from graduating, Canadian graduate programs in psychology must develop and implement gatekeeping policies to address problematic behaviours in students.

**Impairment Exists**

Surveys of clinical directors, APA-accredited training programs, clinical supervisors, and students indicate that graduate students of psychology exhibit problematic behaviours relatively frequently; in fact, the presence of such students has been quite consistent since the emergence of applied psychology. Sigmund Freud (1856–1939), who developed the first comprehensive theory of personality, suggested that prospective practitioners of psychoanalysis undergo analysis themselves, to prevent their unconscious motivations from interfering with the clients’ therapeutic process (Prochaska & Norcross, 1999). This finding assumes the practitioner actually has issues needing resolution.

This assumption has carried over into frequent speculation regarding the mental
health of students who enter training programs in psychology. Speaking to the process of becoming a psychoanalyst, Masud R. Khan (1924–1989) concluded that most trainees are seeking both counselling skills and personal healing (Khan, 1974). Albert Ellis (1913–2007) offered a far more candid description of his peers. He was quite certain that “just about all my fellow graduate students had entered the field because of their own emotional disturbances … not a few were practically psychotic” (Ellis, 1972, p. 109). Zemlick (1980) chastised the profession of psychology for being “well aware of numerous instances wherein students with marked sociopathic character traits or evidencing emotional instability are permitted to graduate” (p. 450).

Unfortunately, it appears that many of those who are attracted to the mental health profession have serious mental health issues (Witmer & Young, 1996), and enter the field “as a respectable means to address their own emotional problems” (Bemak et al., 1999, p. 20). Postulations regarding the mental health of graduate students of psychology have been both prevalent and persistent (Boxley et al., 1986; Vacha-Haase, 1995). However, we need not depend solely on anecdotal evidence to demonstrate the existence of student impairment.

Analyses of the emotional adjustment of graduate students of psychology corroborate these speculations. Depression, anxiety, inappropriate stress reactions, adjustment and personality disorders, burnout, and substance abuse are common mental health issues of psychology students (Bennett, 1986; Huprich & Rudd, 2004). Examining the levels of psychological disturbance in counsellor trainees, White and Franzoni (1990) found significantly higher rates of psychopathy in the counsellor-trainee population in a counsellor-training program accredited by the Council for Accreditation of Counseling and Related Educational Program (CACREP). Counsellor-trainees in this program scored higher than the
general population on assessments of depression, paranoia, antisocial tendencies, and psychosomatic symptoms, among others. Finally, Holzman, Searight, and Hughes (1996) expressed concerns over the alarmingly high rates of depression found among the graduate students of psychology they surveyed, while Johnson et al. (2005) found psychological impairment among graduate students of psychology to be commonplace, frequently impeding the development of professional competence. The students themselves, when questioned about the mental health of their peers, indicated that emotional and interpersonal difficulties are, by far, the most frequently occurring mental health issues within the student population (Mearns & Allen, 1991; Oliver et al., 2004; Rosenberg et al., 2005). Quite clearly, there is a large number of mentally unhealthy individuals enrolled in graduate programs in psychology.

*Prevalence of Impairment*

If psychology trainees exhibit emotional disturbances at such a level, one would suspect that the programs in which they are enrolled are cognizant of the problems. Surveys of both doctoral and master’s level psychology programs, training directors, internship sites, and clinical supervisors in clinical, counselling and school psychology all confirm that problematic, or impaired, students are not uncommon. A comparison among studies proves difficult, as researchers use diverse methodologies, survey different populations, and conduct the research under a variety of premises. In addition, not one study specifically targeted Canadian programs. Most of the following studies are surveys of programs accredited by the American Psychological Association (APA). However, various researchers indicate that Canadian programs were included within the scope of their surveys. Despite the difficulties in conducting direct comparisons of studies, similar student impairment rates exist throughout the research.
Bernard (1975) surveyed 49 Council of University Directors of Clinical Psychology, and found that all of them were aware of at least one student they considered unsuitable for the profession of psychology. In a survey of APA-accredited internship sites, Boxley et al. (1986) found that 66% of the training directors reported an encounter with at least one problematic student. In a similar survey of Master’s-level community- and clinical-psychology programs, 76% of the program chairs reported at least one problematic student within their program (Olkin & Gaughen, 1991), and in a survey of community- and mental-health counselling programs, 98% of the program chairs were aware of at least one impaired student in their program (Gaubatz & Vera, 2006). Mearns and Allen (1991) surveyed the training directors at APA-accredited clinical psychology doctoral programs, and discovered that 93% of the respondents reported an encounter with an impaired graduate student. Indeed, the vast majority of APA-accredited graduate programs in psychology identified at least one, and up to four or more, problematic students in their programs (Busseri et al., 2005; Huprich & Rudd, 2004; Procidano et al., 1995; Schwebel & Coster, 1998; Vacha-Haase, 1995; Vacha-Haase et al., 2004). Forrest et al. (1999), in their comprehensive review of this topic, found that almost every graduate program in psychology encounters a minimum of one impaired student within a three- to five-year cohort.

Program estimates of the average percentage of impaired students were also similar, ranging from 4.2% (Tedesco, 1982) to 4.6% (Boxley et al., 1986) to 4.8% (Olkin & Gaughen, 1991). That percentage of impaired students rises to an average of 10.4% of the student population when Master’s-level community- and mental-health counselling programs are included (Gaubatz & Vera, 2002). Surveying counsellor training programs in Great Britain, Wheeler (1995) found that 44% of respondents indicated they had passed students
about whom they had doubts regarding fitness for the profession, while 78% indicated that they encountered an ethical dilemma when assessing a student’s competence. Specifically, the respondents were unsure how to provide an appropriate evaluation for students who fulfilled the academic requirements of the program, “but whose personalities, interpersonal communication or psychological adjustment caused concern” (Wheeler, 1995, p. 179).

While one problematic student every three years may not seem like a monumental problem, consider the number of graduate programs in psychology in both the United States and Canada, and multiply that by the number of years those programs have been graduating students. Suddenly the number of potentially impaired practicing psychologists becomes alarming. In addition, the above rates represent only those students who were identified as impaired by their programs, and thus may underestimate the frequency of problematic students. Undeniably, many problematic students proceed through their programs undetected, or with their impairments unaddressed, by the training directors or faculty members of their programs (Hensley et al., 2003). Gaubatz & Vera (2002) estimate that approximately 4.9% of impaired students are “gateslipping” (p. 299); that is, proceeding through their program undetected, or addressed, thus suggesting an even more alarming number of impaired students who are able to graduate (Busseri et al., 2005).

Student reports of impaired peers appear to support that suggestion. As students interact with their peers on a more regular basis, they have a unique perspective from which to view potential impairment. When students are surveyed regarding their peers, reports of problematic students vary from an average of 0% - 3% per program (Mearns & Allen, 1991) to 0% - 21% per program (Oliver et al., 2004), to as high as 21.5% of the student population (Gaubatz & Vera, 2006). Rosenberg et al. (2005) found that students could personally
identify an average of 3.32 impaired peers currently in their program, and between 85% (Rosenberg et al., 2005) and 95% (Mearns & Allen, 1991) of students surveyed are aware of at least one impaired student currently enrolled in their respective programs. Whether we rely on student or program estimates of student impairment, problematic students appear to be consistently present in graduate programs in psychology (Procidano et al., 1995). As such, formal policies and procedures, designed to guide the process of identification, evaluation, remediation and, if necessary, the dismissal of such students, would be beneficial.

Extent of Impairment

The degree to which problematic students demonstrate their impairment has prompted both Master’s and doctoral programs to dismiss a portion of these students from their prospective programs. Of the 4.6% of students who were identified as impaired, 12% were dismissed because of their impairment (Boxley et al., 1986). When including ethical violations, dismissal rates rose to 22% (Fly, van Bark, Weinman, Kitchener, & Lang, 1997). In both Master’s and doctoral programs, Biaggio et al. (1983) found that the severity of problematic behaviours, such as poor judgement, psychopathology, poor interpersonal skills or interpersonal problems, and immaturity, accounted for almost one-quarter of the student dismissals.

Again, owing to the differences in methodology, foci, and presentations of the data, comparisons of surveys is difficult. However, Bradey and Post (1991) discovered that emotional or psychological problems were indicated in 73% of the dismissals of Master’s-level counselling students. Of the total number of terminated students in graduate programs in psychology, between 32.5% (Bourg, 1986) and 37% (Busseri et al., 2005) of students were dismissed as a consequence of personal difficulties, concerns of professional suitability, or
incompetence. Vacha-Haase (1995), in her exploration of this problem within APA-accredited programs, found that the majority of terminations from programs were the result of social and interpersonal skill deficits, emotional and personality issues, difficulties with supervision, and unprofessional behaviour. Furthermore, when considering dismissal rates in determining the extent of student impairment, it is also useful to explore the rates at which problem students are counselled out of their programs. While the above dismissal rates are disconcerting, as they illustrate a fairly serious problem with impairment in graduate programs in psychology, several authors agreed that the majority of problem students who leave their programs are counselled out by faculty members or training directors (Bourg, 1986; Busseri et al., 2005; Olkin & Gaughen, 1991; Procidano et al., 1995).

Impact of Impairment

With the existence, prevalence, and extent of student impairment confirmed, the question turns to the impact of such impairment. Does student impairment have serious consequences, or are these students merely an annoyance? As noted above, directors of training programs have identified impairment as a serious concern, and faculty have identified ethical dilemmas involved in passing impaired students or allowing them to graduate. Moreover, the number of impaired professionals is a serious issue for the profession (Orr, 1997; Wood, Klein, Cross, Lammers, & Elliot, 1985), and both logic and studies on impairment suggest that interpersonal skill deficits and other problematic behaviour do not spontaneously disappear upon graduation (Bradey & Post, 1991; Johnson, 2007).

Just as programs and faculty members face ethical and moral dilemmas regarding student impairment, the vast majority of students are also negatively affected by problematic
peers. Indeed, only 5% of students surveyed indicated that their educational experience was not affected by impaired peers (Rosenberg et al., 2005). To discover how impaired peers can have negative repercussions for all students, one need only look as far as the learning environment. Graduate programs in psychology often interweave individual and group-learning experiences, allowing students to learn from both faculty and one another. However, if the group contains a problematic student, group cohesiveness declines, the bulk of responsibility for group assignments often rests with the non-impaired peers, and group supervision is disrupted. Either the instructor avoids addressing the impaired student, thus allowing the problematic behaviours to continue disrupting the learning process, or he or she spends an excessive amount of attention on the impaired student, thus neglecting the other students.

Moreover, non-problematic students are less willing to self-disclose in a group or class that includes an impaired peer, thus thwarting any peer-to-peer learning. (Oliver et al., 2004; Rosenberg et al., 2005). When confronted with an impaired peer, students experience a range of negative emotions, from anger, frustration, confusion, and helplessness, to resentment toward both the problematic student and the faculty members who are not addressing the problem. Non-problematic students also express concern about their programs’ reputations, should the problematic student be allowed to graduate (Mearns & Allen, 1991; Oliver et al., 2004; Rosenberg et al., 2005). The negative consequences of impairment in graduate programs in psychology obviously reaches into even the learning environments provided by those programs.

Is Mental Health Necessary for Psychology Students?

Although impairment is obviously present among graduate students of psychology, a
statement concerning the necessity of a psychologist’s (and thus a psychology student’s) mental health is required. Is mental health a necessary or essential function of a psychologist? Must we be beacons of psychological fitness in order to be professional competent? Some may suggest that psychologists act as mere guides in their clients’ healing processes, and that our personal values, attitudes, and behaviours do not encroach on our ability to provide that guidance. From the limited amount of professional attention given to the mental health of both psychologists and psychology students, one may infer the profession’s implicit agreement of this philosophy. However, belief in the irrelevance of the professional’s mental health seems counterintuitive. How competently can a therapist guide anyone toward mental health if he or she does not already know the way?

Certainly, Freud believed that the therapist needed to be free from neuroses in order to facilitate the client’s analysis. Indeed, psychologists from a variety of theoretical orientations and psychological backgrounds firmly believe that psychological health and self-awareness are essential for the therapist to be able to effectively guide the client toward a positive therapeutic outcome (Donati & Watts, 2005; Roach & Young, 2007; White & Franzoni, 1990). Conversely, there is also agreement regarding the danger inherent in a counsellor’s unresolved issues or lack of self-awareness, as it is likely that these concerns will either be unintentionally acted out within the counselling session (Cushway, 1995) or, in some other way, obstruct the clients’ progress (Corey, Corey, & Callanan, 1993). Either way, symptoms of impairment, such as depression or personal distress, can result in diminished professional functioning (Cushway, 1995; Gilroy, Carroll, & Murra, 2002; Guy, Poelstra, & Stark, 1989).

For example, the development of the therapeutic relationship may be the most
influential factor in client progress (Lambert, 1989; Lambert & Barley, 2001; Okiishi, Lambert, Nielsen, & Ogles, 2003). The therapist’s level of emotional adjustment and self-awareness, and thus his or her contribution to that relationship, has the potential to profoundly sway the client’s process, either positively or negatively (Donati & Watts, 2005). The potential exists for the interactive nature of the therapeutic relationship to aggravate the therapist’s unresolved issues, resulting in additional negative consequences for the client (Emerson & Markos, 1996; Morrissette, 1996).

This is not to say that it is necessary to strive to reach some unattainable standard of perfect mental health, whatever that might be, before engaging in professional practice. However, life in general provides a significant amount of personal stress. Add to that the additional job-related stresses of practicing psychology, such as the potential for burnout and vicarious trauma (Cushway, 1995; Emerson & Markos, 1996; Morrissette, 1996; Schwebel & Coster, 1998), and the therapist’s ability to appropriately manage daily stress as well as interpersonal issues becomes especially important. Numerous authors agree that the psychologist’s general state of self-awareness and good mental health is a necessary, if not sufficient, component to effective therapy. Furthermore, they agree that personal distress or interpersonal impairment significantly jeopardizes attempts at competent, effective counselling and professional functioning (Baldo, Softas-Nall, & Shaw, 1997; Emerson & Markos, 1996; Gilroy et al., 2002; Guy et al., 1989; Johnson & Campbell, 2004; Layman & McNamara, 1997; Prochaska & Norcross, 1999; Roach & Young, 2007; Wheeler, 2000).

Research on therapist characteristics confirms that the therapist’s mental health is important (Buetler, Machado, & Neufeldt, 1994; Kirschenbaum & Jourdan, 2005; Lambert, 1989; Witmer & Young, 1996). The therapist’s emotional well-being “facilitates both
effective treatment processes and outcomes” (Beutler et al., 1986, p. 273). It is also consistently correlated with therapeutic outcomes; that is, “positive therapist mental health can enhance treatment effectiveness… and therapist emotional problems can impact therapeutic progress negatively” (Saunders & Lueger, 2005, p. 2666). Again, several authors have proposed therapist characteristics that are necessary if not sufficient, for effective, competent, and ethical counselling. Most of these characteristics, such as emotional and psychological stability, open-mindedness, good judgement, and personality adjustment, are symptoms of psychological fitness (Johnson & Campbell, 2002; Pope & Kline, 1999). Clearly, the therapist’s mental health and emotional adjustment have a direct impact on the therapeutic relationship, the effectiveness of treatment, and the client’s change process.

As students are budding professionals, their mental health is also important for these same reasons. In addition, students are at a unique stage in their professional development, as they begin to integrate knowledge and skill with appropriate judgement. Interpersonal difficulties or problematic behaviours can interfere with the acquisition of the necessary clinical skills (Pope & Kline, 1999), not to mention professional judgement (Wheeler, 2000), thus undermining their ability to competently care for their clients (Huprich & Rudd, 2004).

Finally, the mental health of psychological professionals and students is a matter of public accountability. The public is taking notice of our psychological fitness, our belief in its importance, and our ability to adhere to our own ethical guidelines (Schoener, 1999). As psychologists, we are ethically obligated to strive for the mental health for which we advocate in others. A therapist who experiences some type of impairment has the potential to cause harm to his or her client. As our ethical codes endorse the principle of nonmaleficence, the absence of problematic behaviours, then, is a requirement of the profession.
Ethical Considerations

In considering the necessity of specific policies aimed at identifying, evaluating, offering remediation, and if necessary, dismissing impaired graduate students of psychology, psychology’s codes of ethics provide considerable guidance. These codes serve a dual purpose. They encourage highly competent practice through aspirational principles that promote the profession’s values, while also providing a set of professional standards that must be met by those belonging to the profession (Pettifor, 2004). Moreover, codes of ethics set a tone for the profession; they declare the profession’s fundamental attitudes, values, and beliefs, its determination to ensure quality, competent service, its willingness to discipline those who do not meet the profession’s standards, and its desire to protect society from harm by its members. As the door to the profession, graduate programs in psychology must accept their “special ethical obligation” (Kitchener, 1992, p. 190) to be the initial gatekeepers for the profession of psychology (Bhat, 2005; Busseri et al., 2005; Frame & Stevens-Smith, 1995; Gaubatz & Vera, 2002; Jackson-Cherry, 2006; Jordan, 2002, Kerl et al., 2002; Lumadue & Duffey, 1999, McAdams III & Foster, 2007; McAdams III et al., 2007; Vacha-Haase et al., 2004).

In Canada, the profession of psychology is subject to two primary codes of ethics, the CPA’s Canadian Code of Ethics for Psychologists (2000) and the CCA’s Code of Ethics (2007). The CPA’s Code (2000) promotes four primary principles: Respect for the Dignity of Persons; Responsible Caring; Integrity in Relationships; and Responsibility to Society. It emphasizes values like beneficence, integrity, competence, and social responsibility, to which members of the profession should aspire. Similarly, the CCA identifies six overarching principles that inform its ethical articles. Those principles include beneficence,
fidelity, nonmaleficence, autonomy, justice, and social interest. A psychologist who adheres to these values is an ethical or competent psychologist. At the other end of the continuum, however, are attitudes and values, and ensuing behaviours, that are problematic, unethical, and in some cases, dangerous.

According to the Values Statement for Principle II: Responsible Caring, in the CPA’s *Code of Ethics* (2000), the discipline of psychology is required to “consider incompetent action to be unethical per se, as it is unlikely to be of benefit and likely to be harmful” (¶ 4). This requirement addresses two important ideals: the actions of psychologists should benefit others and their actions should avoid harming anyone. Indeed, specific standards advise psychologists to advocate for the welfare of the public in general and those subject to the discipline of psychology in particular (Principle I, section 12; Principle II, section 1). In addition, psychologists are instructed to avoid actions that may harm the public in general or those subject to the discipline of psychology in particular (Principle I, section 5; Principle II, section 2). The CCA’s *Code* (2007) also requires the promotion and protection of client welfare (Article A2; Article B1), and that counsellors refrain from engaging in discriminatory behaviour, thus causing harm. The value of nonmaleficence is undoubtedly a value of the profession, and directly related to competent, or unimpaired, practice.

These codes of ethics are also quite clear on the issue of impairment. Psychologists must (a) refrain from practicing psychology while impaired, (b) acknowledge perspectives, attitudes, and values that may impair both professional judgement and practice, thus resulting in harm to the client, (c) prevent others from practicing psychology while impaired, and (d) assume responsibility for the adherence to these codes of ethics of any subordinate individuals (CCA, 2007; CPA, 2000). According to these codes of ethics, graduate programs
and their educators have a responsibility to ensure that both they, and their respective trainees, are not engaging in the practice of psychology while they are impaired.

Refrain from Impaired Practice

The CPA’s Code (2000) is quite explicit in its admonitions against engaging in psychological practice when one is physically, mentally, or emotionally impaired. The code warns specifically against practicing “if a physical or psychological condition reduces [one’s] ability to benefit and not harm others” (Principle II, section 11; CPA, 2000, p. 17). It goes further, cautioning professionals “to avoid conditions (e.g., burnout, addictions) that could result in impaired judgment and interfere with their ability to benefit and not harm others” (Principle II, section 12; CPA, 2000, p.17). If one’s definition of impairment includes incompetent practice, sections 8 through 10 (Principle II) and section 4 (Principle III) encourage practitioners to maintain professional competency, while section 6 (Principle II) specifically prohibits incompetent practice. Furthermore, if the definition of impairment is expanded to include unethical practice, obviously all ethical standards would apply. While it is possible to commit an ethical violation without being impaired, many ethical violations can indicate impaired professional judgement, or any of the numerous other symptoms of impairment.

The CCA’s Code (2007) is less specific regarding impaired practice, yet still requires counsellors to refrain from engaging in relationships that may impair their judgement (Article B8). If professional competence is considered, a number of ethical standards address the importance of maintaining, and operating within, one’s competence, as well as being aware of one’s limits of competence (Articles A1, A3, D3, F2). Again, if unethical behaviour is included in the definition of impairment, any violation of the ethical codes constitutes
impairment.

*Acknowledge Bias*

As a psychologist is ethically obligated to avoid impaired practice, he or she would need to engage in self-reflection in order to recognize any instances of bias, problematic thinking, or incompetence. Both the CPA and CCA codes address this issue as well. Psychologists are encouraged to assess how their personal “experiences, attitudes, culture, beliefs, values, social context, individual differences, specific training, and stresses influence their interactions with others” (Principle II, section 10; CPA, 2000, p. 17), whether in practice or in research (Principle II, section 10, 14; Principle III, section 10). The CCA encourages counsellors to “recognize the need for … personal care” (Article A1; CCA, 2007, p. 5) as they strive for professional competency. In addition, counsellor-educators should “encourage and facilitate the self-development and self-awareness of students, trainees, and supervisees, so that they learn to integrate their professional practice and personal insight” (Article F9; CCA, 2007, p. 20). The underlying premise of these ethical standards is that impairment, whether the result of incompetent practice, or a lack of emotional adjustment, does not benefit the client and has the potential to result in harm.

When a professional psychologist continues to practice after becoming aware of his or her impairment, it is considered a matter of professional misconduct. Does it not follow, then, that misconduct is also involved if a faculty member, a practicing psychologist, recognizes the impairment of a student, and does nothing (Kutz, 1986)? In addition to recognizing the potential for impairment, those within the discipline of psychology have a responsibility take steps to prevent any harm that may result from impairment.

*Prevent Impaired Practice*
According to the CPA’s codes of ethics, psychologists are responsible for preventing impaired practice from both professional colleges and students or trainees of psychology. Specifically, psychologists are to intervene when another professional is engaging in activities that may be harmful, whether the harm is of a serious nature (Principle II, section 40) or simply due to “a lack of sensitivity, knowledge, or experience” (Principle II, section 41; CPA, 2000, p. 20). The code goes further to suggest options, ranging from an informal discussion with the professional in question to reporting the professional’s conduct to the appropriate regulatory authorities, for intervening in such situations. Moreover, psychologists are obligated to protect both psychological knowledge “from being misused [or] used incompetently” (Principle IV, section 11; CPA, 2000, p. 30), and the public trust from being broken, “by bringing incompetent or unethical behaviour…to the attention of the appropriate authorities…” (Principle IV, section 13; CPA, 2000, p. 30). Intervening, therefore, when the actions of another are incompetent, unethical, or impaired is not merely a suggestion, but a requirement of the profession.

This requirement extends to those who teach or train psychology students. Indeed, section 4 (Principle II) specifies that educators must refuse to teach or train a psychology student or trainee who, “in the psychologist’s judgement, will use the knowledge or skills to harm others” (CPA, 2000, p. 16). The correlation between the potential for client harm and practitioner impairment already established, this standard presents educators with two responsibilities: (a) identify those who are impaired, and (b) refuse to train them (Bhat, 2005). Furthermore, section 7 (Principle II) dictates that psychology educators both identify the competency of those to whom they delegate activities, and refrain from delegating those activities to those who are not deemed competent. In other words, if an educator determines
that a trainee is impaired, the educator is ethically obligated to prevent that trainee from practicing.

The CCA’s Code (2007) also designates counsellors, and counsellor educators as responsible for preventing client harm. Counsellors have the obligation to intervene when “they have serious doubts as to the ethical behaviour of another counsellor” (Article A7; CCA, 2007, p. 6). Again, preventing harmful actions is the primary concern. Specific to counsellor educators, the CCA’s codes of ethics embrace nonmaleficence, and require educators to intervene, when necessary, “to ensure the welfare of clients during the supervised practice period” (Article F5; CCA, 2007, p. 19). As well, educators should refer their students or trainees for personal counselling when personal issues are negatively influencing the students’ performance (Article F10). Prevention of client harm is paramount, and the responsibility of every psychologist.

**Assume Overall Responsibility**

Graduate students of psychology, trainees, and supervisees are subject to the same ethical standards to which practicing professionals are obligated to adhere. Students are expected to be aware of any bias, attitude, interpersonal problem, or lack of knowledge that may prevent them from conducting themselves competently and ethically. They are expected to refrain from practice and seek assistance when such conditions manifest themselves. Moreover, they are expected to intervene when the incompetent or unethical behaviour of a peer may cause harm to a client. The bulk of responsibility for ensuring that students, or trainees, follow the profession’s ethical codes, however, falls on the professional. The last standard of each of the four principles of the CPA’s Code of Ethics (2000), and Article F1 of the CCA’s Code of Ethics (2007) state that the professional psychologist bears a global
responsibility to ensure that students, trainees, and supervisees adhere to the code of ethics while conducting themselves within the profession of psychology. If a student, then, is impaired, causing clients harm, or is acting unethically or incompetently, psychology educators and their respective programs are, unquestionably, ethically obligated to act.

Finally, Kitchener (1992) highlights the responsibility that graduate programs in psychology and their faculty members have to model ethical behaviour. Regarding impaired students, Kitchener (1992) asserts that programs “can and should take responsibility to provide clear guidance about the ethical behaviour expected of students… [and] to dismiss students from programs if they do not meet minimal standards even after remedial work” (p. 194). Indeed, if the program or faculty members ignore problematic trainees, it may lead some students to similarly disregard the ethical principles (Gaubatz & Vera, 2006). Better than any ethics class, watching a professional act ethically to protect a client from harm is an unforgettable lesson.

Accreditation Requirements

Lest the ethical obligations are not sufficient for graduate programs in psychology to realize the need for gatekeeping policies, further encouragement is provided by accreditation standards. Program accreditation promotes both the quality and accountability of education through the evaluation of established standards. As such, accreditation provides a certain amount of prominence among educational institutions. In Canada, doctoral psychology programs and internships can receive accreditation through the CPA, and while as of February, 2007, it no longer accepts new applications from Canadian graduate schools (CPA, 2008), the APA has also accredited Canadian doctoral programs.

Eligibility for accreditation depends on, among other requirements, the existence of
formal policies and procedures of evaluating, remediating, and possibly terminating students who fail to achieve program standards. The APA’s (2008) Guidelines and Principles for Accreditation of Programs in Professional Psychology requires that programs provide students with written notification of program requirements, evaluations, the opportunity for remediation, and the right to appeal any evaluation (Domain E: Student-Faculty relations). While not specifically identifying impairment as an issue, programs requesting accreditation are required to ensure that their students exhibit “attitudes essential for life-long learning, scholarly inquiry, and professional problem solving” (APA, 2008, p. 11), to all of which impairment is antithetical.

The CPA’s (2002) Accreditation Standards and Procedures for Doctoral Programmes and Internships in Professional Psychology requires students to demonstrate both “intellectual ability and interpersonal skill…” (CPA, 2002, p. 53). Specifically related to gatekeeping policies for impairment, the section on “Programme Administration” for doctoral programmes in clinical, counselling, and school psychology, requires that:

J. The programme has developed policies and procedures for handling students’ academic, practice and/or interpersonally related difficulties [italics added]. Policies and procedures for developing, implementing and monitoring remediation plans are also necessary. These policies and procedures are communicated, in writing, to each student at the start of his or her graduate training.

K. Remediation policies and procedures detail the mechanisms through which a student might lodge a complaint against the programme or grieve an action, or appeal a decision or evaluation, made by the programme. Mechanisms for appeal are communicated in writing to students. (CPA, 2002, p. 34)
Programs in clinical neuropsychology have similar requirements. Furthermore, the CPA stipulates that programmes have policies specifically designed to address student impairment. Under the “Students” section for clinical, counselling, and school psychology, the standards state:

F. Students who experience academic, practice and/or interpersonally-related difficulties [italics added] are counselled early and offered a remediation plan in concert with the policies and direction of the programme’s Director of Training and training committee. Students whose serious difficulties persist despite counselling and remediation are made aware of career alternatives and, if necessary, dropped from the programme [italics added]. (CPA, 2002, p. 40)

Again, the requirements are similar for programmes of neuropsychology. Clearly, accreditation standards encourage the development and implementation of gatekeeping polices directed at preventing impaired students from graduating.

**Insufficient Program Standards**

The existence of impairment, the profession’s ethical obligations, and accreditation requirements all urge graduate programs in psychology to manage problematic students through gatekeeping policies. However, is it necessary to augment already existing program requirements and policies? Admission criteria, along with academic and clinical standards, already filter out those students whose efforts do not qualify them to either enter, or remain in a graduate program in psychology. Are these methods sufficient? Considering the frequency, prevalence, and extent of impairment among graduate students of psychology, it appears that neither the current admission criteria nor the programs’ academic and clinical requirements are sufficient to adequately address the very real concern of student impairment
Admissions Criteria

Whether the graduate program specializes in counselling, clinical, school, or professional psychology, admission requirements tend to focus on a limited number of academically based items, such as the undergraduate grade point average (UGPA), the Graduate Record Examination (GRE), and letters of recommendation from either academic or professional sources. If the purpose of the admission criteria is to admit students who will perform well academically within the program, then reliance on these aptitude measures is somewhat warranted (Smaby, Maddux, Richmond, Lepklowski, & Packman, 2005). Caution is suggested, however, as some researchers have concluded that the predictive value of the UGPA for academic success in any graduate program is doubtful (Abedi, 1991), and the quantitative and verbal scores of the GRE are “virtually useless” (Morrison & Morrison, 1995) at predicting academic success in graduate school.

Alternatively, if the mission of graduate schools of psychology is to admit students who will succeed academically and become competent, ethical counsellors, then traditional academic admission criteria are insufficient (Kerl et al., 2002). Previous academic abilities are not predictive of future counsellor efficacy, maturity, or personal development (Markert & Monke, 1990; Smaby et al., 2005; Walton & Sweeney, 1965). The GRE has yet to show a positive correlation with counselling skills (Costanzo & Philpott, 1986, Smaby et al., 2005), and UGPA and quantitative score of the GRE were both negatively correlated with counselling competence in one study (Hosford, Johnson, & Atkinson, 1984). Indeed, Korman (1974) believed that a “disproportionate reliance on traditional selection criteria for
professional training (e.g., grades and Graduate Record Examination scores) has proved to be inadequate in providing society with a pool of socially responsive, culturally diverse, and professionally sensitive psychologists” (p. 444). To become a minimum-wage earning, frontline human service worker, the application process requires the applicant to provide a clean criminal and child welfare record. How do graduate schools justify requiring less from their students?

Regarding the letters of recommendation, Hosford et al. (1984) found no evidence for their predictive value of counselling effectiveness. In most cases, students provide letters that are positive, but not necessarily representative of either their counselling skills or academic abilities, and definitely not of their mental health (Bradey & Post, 1991; Grote, Robiner, & Haut, 2001; Miller & Van Rybrock, 1988). Clearly, traditional academic admissions criteria are not functioning as adequate gatekeepers. Considering the reality of student impairment, the admission process should focus on interpersonal skills and personal development, thus proactively preventing problematic students from ever gaining admittance into a program (Elman, Forrest, Vacha-Haase, & Gizara, 1999; Fly et al., 1997; Huprich & Rudd, 2004; Kerl et al., 2002).

**Academic and Clinical Requirements**

A graduate degree in psychology requires the successful completion of both academic coursework and clinical training. The student receives foundational knowledge of psychological theory and research through coursework, and an opportunity to develop clinical skills through practicum or internship training. Based on these requirements, the public “presumes that those who graduate are fully able to provide service that is effective and safe” (Schoener, 1999, p. 693). However, these requirements are not sufficient to ensure
that students are prepared to become competent, ethical counsellors. Current evaluations of either coursework or clinical work used by the majority of graduate programs in psychology do not formally assess personal characteristics, interpersonal effectiveness, maturity, or any other subjective quality that may indicate fitness to practice (Bemak et al., 1999; Bourg, 1986; Jordan, 2002; Kitchener, 1992; Lumadue & Duffey, 1999).

Grades in academic coursework reflect the student’s familiarity with psychological theory, and his or her skill at articulating that knowledge. They do not reflect the student’s character, such as whether he or she is a responsible, mature person, capable of moral reasoning and sound judgement. They also do not reflect any underlying issues or conflicts that may interfere with the student’s ability to be an effective, ethical counsellor. Should impairment concerns arise, educators are unable to incorporate these concerns into a grade.

Evaluations of clinical ability often reflect only the student’s mastery of counselling techniques, despite evidence that techniques are not enough to become a competent counsellor (Lumadue & Duffey, 1999; Torres-Rivera et al., 2002). Furthermore, while off-site supervisors often conduct evaluations of these techniques, they seldom address trainee impairment, either because there is no policy to guide them, the policy is unfamiliar to them, or because they are uncomfortable with issues of interpersonal evaluation (Bhat, 2005; Gizara & Forrest, 2004; Johnson et al., 2005). The question for graduate programs in psychology, then, is how to address impairment when students perform well academically and even have basic counselling skills, yet still demonstrate interpersonal, psychological, or emotional impairment (Bhat, 2005; Koerin & Miller, 1995). The insufficiency of current program standards to address this question is undeniable.

Perceived Barriers to Gatekeeping
Graduate educators in psychology programs are obviously aware of impairment within their student population (Bernard, 1975; Gaubatz & Vera, 2006; Olkin & Gaughen, 1991), and many authors are calling for programs to develop formal gatekeeping policies or statements (Knoff & Prout, 1985; Forrest et al., 1999). In addition, the correlation between student impairment and client harm is clear, and psychology educators undoubtedly have ethical responsibilities regarding the values of nonmaleficence and beneficence. What, then, prevents graduate programs in psychology from developing specific, formal gatekeeping policies to address student impairment?

There are a number of potential barriers that programs face as they contemplate the development of such policies. In today's litigious society, many programs are fearful that the faculty’s decision to dismiss a student for reasons of interpersonal impairment will result in litigation (Vacha-Haase et al., 2004). Indeed, many unqualified psychology students are able to continue in their graduate programs, as they "manipulate faculty… often by threatening a lawsuit" (Zemlick, 1980, p. 450). Many authors cite fear of litigation as the primary reason for not addressing the issue of impaired students who are enrolled in graduate programs in psychology (Baldo et al., 1997; Forrest et al., 1999; Frame & Stevens-Smith, 1995; Johnson et al., 2005; Olsheski & Leech, 1996).

A second challenge to developing gatekeeping procedures is the role confusion of psychology educators. Most psychologists enter this profession to facilitate the personal growth and development of others. As educators, however, these same psychologists must critically evaluate the personal growth and development of their students. Conducting, and communicating the results of such evaluations can be quite difficult, especially when the evaluation is negative. Finally, the process of developing gatekeeping policies can present
numerous challenges. The time and energy required and the difficulty in determining minimum program standards for personality characteristics, emotional stability, and interpersonal functioning, can present a practical barrier.

_Fear of Litigation_

A primary barrier to developing and implementing such gatekeeping procedures is fear. Many graduate programs are fearful of facing, and losing, a legal battle initiated by a dismissed student, especially if the dismissal was based on a subjective evaluation of the student’s interpersonal functioning (Baldo et al., 1997; Vacha-Haase et al., 2004). If a student were dismissed from a program because he or she failed to meet the academic requirements of the program, there would be few, if any, reasons to dispute the appropriateness of the decision. On the other hand, if a student were dismissed because of his or her inability to meet the emotional stability requirements of the program, there would be room for argument. Graduate programs in psychology, therefore, face a dilemma: should they dismiss an impaired student and potentially face a legal challenge, or must they opt to retain that student and defy both professional ethics and the profession’s responsibility to society (McAdams III et al., 2007).

A review of the literature regarding student-initiated legal challenges to dismissals, based on problematic behaviours, reveals that this fear of litigation is unfounded (Bourg, 1986; Forrest et al., 1999; Frame & Stevens-Smith, 1995; Johnson & Campbell, 2002, Kerl et al., 2002; Olkin & Gaughen, 1991; Vacha-Haase et al., 2004). In Canada, graduate programs in psychology have dismissed students for reasons of impairment (Busseri et al., 2005; Elman & Forrest, 2004; Huprich & Rudd, 2004; Vacha-Haase et al., 2004). However, there has yet to be a student who has pursued legal action against a graduate program in
psychology for wrongful dismissal. As of this writing (March, 2008) a comprehensive search of Canadian legal proceedings reveals that not a single student of a graduate program in psychology has initiated legal action against neither the institution nor the program from which she or he was dismissed for non-academic reasons.

While this may be somewhat comforting, conventional wisdom indicates that, in time, a disgruntled psychology student will address his or her concerns in the legal arena. Interestingly, the legal profession screens its applicants for both moral character and psychological fitness qualities. If anyone is apt to pursue legal recourse, it is an emerging law student, stopped at the gates of his or her profession for character issues. Yet, few dismissed law students take legal action against their former programs. When they do, the courts have consistently upheld the programs’ right to both determine the requirements of the program and profession, and to dismiss the student who does not meet those standards (Johnson & Campbell, 2002).

Moreover, a review of cases involving problematic students in the United States may provide additional comfort. Despite the litigious nature of the American society, only a limited number of students who were dismissed for reasons of impairment have initiated legal proceedings. As with the dismissed law students, U.S. courts have consistently upheld the programs’ right to set standards and requirements as they deem necessary.

Legal Protection

Many of the early legal rulings regarding student dismissals for reasons of impairment involve the discipline of medicine. Professional programs that encompass both an academic and clinical component also serve as precedent-setting cases for graduate programs in psychology (Kerl et al., 2002). As stated above, U.S. courts have consistently
upheld the educational programs’ right to determine academic requirements, and to dismiss students who do not meet those standards. Additionally, within professional programs, the operational definition of academic performance includes the requirements of the profession, including adherence to ethical standards and demonstrated interpersonal skill (Cobb, 1994). The following is a review of United States legal proceedings that provide graduate programs in psychology with the necessary legal authorization to include interpersonal skills in the academic requirements of their programs, and to dismiss those students who, despite reasonable accommodation for any disability, are unable to meet those requirements.

Definition of academic criteria. In Greenhill v. Bailey (1975), the court defined academic performance as the “student’s demonstrated knowledge, technical and interpersonal skills, attitudes, and professional character” (Knoff & Prout, 1985, p. 791), and the court’s ruling in Harris v. Blake (1986) supported that definition. Further rulings have included both clinical competency and personal attitudes within the academic performance domain (Kerl et al., 2002). This ruling allows graduate programs in psychology to incorporate interpersonal functioning, including genuineness and empathy, in their academic standards (Frame & Stevens-Smith, 1995). Furthermore, it allows the programs to address student impairment through an academic, rather than disciplinary, mechanism.

Probably the most discussed ruling within the gatekeeping literature is the United States Supreme Court decision in the Board of Curators of the University of Missouri v. Horowitz (1978). In this case, Charlotte Horowitz was a medical student who, despite excellent academic grades, had difficulty developing rapport with peers and patients, clinical competency, and appropriate personal hygiene habits. Ms. Horowitz failed to improve in these areas, despite reasonable accommodations, resulting in the faculty’s decision to dismiss
her. Ms. Horowitz filed legal proceedings, alleging a lack of due process, among other concerns. Appealed to the Supreme Court of the United States, the university’s decision to dismiss Ms. Horowitz was ultimately upheld, as the court allowed any behaviour deemed “predictive of future professional functioning” (Tedesco, 1982, p. 695) to be considered an academic requirement. This case reaffirmed the decision in Greenhill v. Bailey (1975), which allowed interpersonal skills and attitudes to be considered academic requirements, and allowed educational programs to determine what is required for professional competence (Knoff & Prout, 1985).

**Requirement for remediation.** Directly related to graduate programs in psychology, the ruling in Shuffer v. Trustees of California State Universities and Colleges (1977) permits programs to require participation in relevant and appropriate remediation when a student has been identified as impaired (Forrest et al., 1999). Indeed, the courts appear to be more than willing to allow graduate programs in psychology to establish their own requirements for the bestowal of a degree. In Anderson v. University of Wisconsin (1998), the court affirmed the authority of counsellor education programs to declare and enforce their standards for graduation. Therefore, in relation to student impairment, not only can psychology training programs address interpersonal skills through evaluation of academic performance, they can determine which interpersonal skills are academic requirements of their programs.

**Reliance on professional judgement.** Courts in the United States have acknowledged, time and again, that members of the profession of psychology are indeed better qualified than the legal system to judge the adequacy of a student’s performance (Kerl et al., 2002). After facing a legal challenge for dismissing an impaired graduate student of psychology, McAdams III et al. (2007) were pleased to report that the courts determined their
“professional judgment… a valid determinant of who is and who is not fit to be entrusted with the professional care of persons in need” (p. 219). Clearly, the United States legal system defers to the profession when determining whether students enrolled in graduate studies must meet certain personal and professional standards as conditions of program continuation and graduation.

Programs standards and disability accommodation. When considering the impairment of a student, graduate programs often become weary of the appearance of discrimination on the basis of a disability, and thus face a legal challenge under the Canadian Charter of Rights and Freedoms (1982). Without a Canadian precedent in this area, we may once again look to the United States, where similar laws prohibiting discrimination based on a disability exist through the Americans With Disabilities Act (ADA) of 1990. In cases of psychiatric disability, the courts have consistently upheld both the schools’ responsibility to provide reasonable accommodation for disabled students and the schools’ right to terminate the students if “their disability threatens the essential functions of the profession” (Elman et al., 1999, p. 714).

In Wood v. President & Trustees of Spring Hill College (1992), a student suffering from schizophrenia was dismissed from her program and sought legal recourse. The United States Court of Appeals for the Eleventh Circuit declared that, while accommodation must be made for students with disabilities, students are still expected to meet all the academic requirements of the program, “regardless of any disability” (Enochs & Etzbach, 2004, p. 398). If the student is unable to achieve proficiency in the requirements of the program (e.g., psychological stability), dismissal is justified, regardless of disability (Johnson et al., 2005).

The United States District Court of New England’s ruling in a similar case further
supported that opinion. In *Halasz v. University of New England* (1993), the court ruled that while reasonable accommodations must be made for those with disabilities, it is legally permissible to dismiss the student who, after being accommodated, still does not meet the standards of the program. Similarly, the United States Supreme Court of Appeals for the Sixth Circuit ruled, in *Doherty v. Southern College of Optometry* (1988), that while programs must offer accommodation to students with disabilities, they are not required to alter or amend their program standards in order to accommodate such students (Enoch & Etzbach, 2004).

Clearly, the United States courts distinguish between a disability that requires accommodation, and an inability to meet program requirements that requires intervention. Accommodations must be made for the disability; however, dismissal is justified when students are unable to meet program requirements. If the program requires psychological stability, or an absence of problematic behaviours, then problematic behaviours are justified grounds for an academic dismissal (Johnson & Campbell, 2004).

Although no legal challenges based on the *Canadian Charter of Rights and Freedoms* (1982) have been initiated toward Canadian graduate schools, a review of provincial Human Rights Commissions reveals that Canadian law also distinguishes between disability and inability. For example, the Alberta Human Rights and Citizenship Commission (AHRCC) directs post-secondary educational institutions to make reasonable accommodations for student with disabilities (AHRCC, 2006). However, it also clearly delineates the limits of such accommodation, such that:

Accommodation does not require that post-secondary institutions lower academic or non-academic standards to accommodate students with disabilities. Accommodation
does not relieve the student of their responsibility to develop the essential skills and competencies expected of all students. (AHRCC, 2006, p. 6)

The Ontario Human Rights Commission (OHRC) provides similar demarcations between accommodation and program standards:

An appropriate accommodation at the post-secondary level would enable a student to successfully meet the essential requirements of the programme, *with no alteration in standards or outcomes* [italics added], although the manner in which the student demonstrates mastery, knowledge and skills may be altered. (Modifying educational requirements, ¶ 3)

Graduate programs in psychology, then, are clearly within their rights to expect students to adhere to program requirements, regardless of disability.

The deciding issue in many of the above court rulings is whether the graduate programs provided their students with regular and fair evaluations, constructive feedback, and the opportunity to improve in the problem areas (Forrest et al., 1999; Knoff & Prout, 1985; McAdams III et al., 2007; Wilkerson, 2006). In cases where the program provides every student with timely evaluations, written notification of evaluation outcomes, the opportunity for remediation and appeal, the courts have respected the decisions of graduate program faculty when dismissing students (Forrest et al., 1999; McAdams III & Foster, 2007). When students are given information regarding expectations at the beginning of the program, when faculty are given guidance regarding evaluation and remediation options, and when the procedures are outlined for both faculty and student, the courts have consistently upheld the institutions’ right and responsibility to be gatekeepers for the profession.

*Legal Liability*
While many graduate programs in psychology indicate that fear of litigation impedes them from formally addressing the impact of impaired students in their programs (Baldo et al., 1997; Olsheski & Leech, 1996; McAdams III et al., 2007), their inaction toward problematic behaviours is tantamount to neglect of their legal responsibilities toward the clients of the impaired student. Supervisors are subject to *respondeat superior*, a legal doctrine that proclaims, “someone in a position of authority or responsibility, such as a supervisor, is responsible for acts of his or her trainees… [and] are ultimately legally responsible for the welfare of clients counseled by their supervisees” (Cormier & Bernard, 1982, p. 488). Consequently, supervisors have a legal responsibility to protect clients from the problematic behaviours of impaired students (Kerl et al., 2002). Meyer (1980) warned that faculty members, who fail to address impaired graduate students of psychology could be held liable, should the student harm a client.

Indeed, that warning proved prophetic. In Louisiana, a client sued both her former therapist, and the Master’s program that trained and allowed the therapist to graduate, for malpractice. According to the attorney for the plaintiff, universities bear some legal responsibility for the harm done to clients when they allow incompetent or impaired students to graduate (Custer, 1994). While the case was settled out of court, preventing any legal precedent in this area, there is obviously a liability issue for universities who refuse to address, and thereby allow impaired students to graduate.

*Dual Role Confusion*

The study and practice of psychology is founded in the belief that change is possible; that is, issues are resolvable, mental disorders are treatable, and interpersonal difficulties need not be permanent. Psychology is a helping profession, and those practicing psychology
are equipped to encourage, motivate, and facilitate personal growth. However, graduate programs in psychology, and program educators and supervisors, are also responsible for maintaining the public trust by allowing only those students who are capable of competent, ethical practice to graduate; that is, students who will promote the welfare of, and not inflict harm on their clients (Johnson, 2007; Kitchener, 1992; Lamb et al., 1987; Wheeler, 1995). A common barrier to the development and implementation of gatekeeping policies, then, centres on the struggle between the seemingly opposite roles of both advocate and judge. Described as “contradictory pulls between their nurturing and evaluative responsibilities” (Johnson et al., 2005, p. 655), these dual roles often impede educators from consistently assuming their responsibilities as gatekeepers for the profession (Bennett, 1986; Bernard & Goodyear, 2004; Corey et al., 1998; Johnson, 2007; Koerin & Miller, 1995).

Psychologists are trained “to be non-judgemental, to be empathic, to accept individuals differences” (Gizara & Forrest, 2004, p. 133) and to view personal difficulties as opportunities for intervention and growth. Furthermore, those within the profession who choose to become educators do so with the objective of assisting students to develop those qualities (Forrest et al., 1999; Kitchener, 1992). Yet, when faced with an impaired student, educators and supervisors often experience distress and guilt, as they endeavour to find a balance between their ingrained belief that change is possible, and their ultimate responsibility to graduate only competent students (Gizara & Forrest, 2004; Kerl et al., 2002). They bear the burden of knowing that a negative evaluation may result in rather harsh consequences for the student’s academic and professional career. Likewise, without clear direction from the employing institution through formal gatekeeping policies regarding non-academic standards, or specific training in supervision and interpersonal competence.
assessments, educators are often hesitant to make decisions regarding what constitutes impairment (Bhat, 2005; Gizara & Forrest, 2004; Johnson et al., 2005; Minnes, 1987).

Adding to their hesitation is the knowledge that determinations of competence may vary among individual faculty members and that personal familiarity with the student may influence the objectivity of the evaluation (Bhat, 2005; Johnson, 2007; Wheeler, 1995). Furthermore, additional documentation and other time-consuming administrative duties uninvitingly accompany any negative evaluation (Bemak et al., 1999; Bernard & Goodyear, 2004; Dudek, Mark, & Regehr, 2005; Roberts et al., 2005), making gatekeeping a very unattractive responsibility. Undeniably, many graduate school educators appear uncomfortable addressing impairment at all, believing that any gatekeeping duties belong to licensing boards, peers, or practicum and internship supervisors (Johnson & Campbell, 2004; Olkin & Gaughen, 1991). Described as “social loafing” (Elman et al., 1999, p. 716), many programs ignore their gatekeeping obligations, believing that someone else will accept the responsibility for protecting the profession from impaired graduates.

_Dual Role Requirement_

Although faculty members face genuine challenges when they encounter an impaired student, these challenges are not reason enough to disregard their ethical and moral responsibility to act. Rather, they highlight the need for the development and implementation of gatekeeping policies, as each challenge is mitigated by the presence of such policies. Ethically, programs “need to balance compassion and support for students with honest evaluations and intellectual rigor” (Kitchener, 1992, p. 191). Identifying a need for help, and allowing an opportunity for remediation, are ethical and moral acts (Frame & Stevens-Smith, 1995). Gatekeeping policies can clearly outline when evaluations are required, what is to be
evaluated, and who is responsible for the evaluation. Such clear guidelines will increase the educator’s comfort level with their evaluative role.

What is more, the inclusion of remediation procedures honours the nurturing side of psychology. Perhaps instructors would be more inclined to offer constructive feedback through a negative evaluation if they knew that such an evaluation presented the student with an opportunity for growth through remediation. In addition, a clear set of procedures for both evaluation and remediation removes the possibility for a familiarity bias and may alleviate the guilt that plagues some instructors when a negative evaluation becomes necessary. Finally, defining a set of professional and personal skills required of students, communicating those standards to both faculty and students, and outlining the procedures for evaluations and appeals provide a rather solid safety net for any appeals or legal processes that can result from a negative evaluation (McAdams III et al., 2007).

**Difficulty with Policy Development**

It is undeniable that the development of such policies is a daunting task, as the policies need to address the identification and evaluation of student impairment, outline the possibilities and procedures for remediation, and detail the procedures for dismissal. From a practical perspective, the time and effort necessary creates a barrier to the development of such policies, as most faculty members are already operating under a heavy burden of responsibility toward both the programs and their students. Additionally, while many training directors of graduate school programs have identified impairment within their student population, some operate from the belief that the relative infrequency with which it occurs negates the need for specific policies to address it (Koerin & Miller, 2005). As well, the discipline of psychology as a whole has not yet come to a consensus regarding the specific,
interpersonal characteristics that are essential or, conversely, detrimental, to the practice of psychology (Beutler et al., 1986; Donati & Watts, 2005; Pope & Kline, 1999; Procidano et al., 1995; Roberts et al., 2005). Therefore, such determinations of program requirements remain the responsibility of the individual institutions.

Outlining the specifics of any policy is time-consuming. However, as shown by the difficulties in even defining “impairment,” developing a comprehensive list of unacceptable interpersonal characteristics is an overwhelming charge, and it is only the first step in developing gatekeeping policies. Which personal characteristics are unacceptable? What will be the minimum standard of acceptable behaviour? How will those characteristics be evaluated, and who will be responsible for those evaluations? Once the policies have created the picture of impairment, what types of remediation have shown validity, how and when will they be offered, and what will be involved in a decision to dismiss a student? Add to these questions the fear and confusion most graduate programs experience regarding their gatekeeping function and the difficulties inherent in developing specific policies to address impairment can be paralysing.

Policy Development Assistance

Fortunately, psychology is a profession uniquely qualified to assess mental and emotional fitness, as well as to provide effective interventions. Indeed, Schoener (1999) suggested that psychology is more than adequately equipped with assessments and interventions to manage student impairment. Moreover, a number of graduate programs in psychology have already developed, and successfully implemented gatekeeping models to address their impaired students.

These gatekeeping models (described below) outline the specific behaviours required
by their respective programs, the “how” and “when” of student evaluation, the remediation process, and student dismissal procedures. Choosing which model fits best for an individual institution is a far less daunting task than creating one, as is the time required to amend a model to a specific program. Put differently, graduate programs in psychology wishing to embrace their gatekeeping obligations do not need to “reinvent the wheel.”

Review of Gatekeeping Models

The time involved in, and complexity of, developing gatekeeping policies have given many graduate schools of psychology pause regarding even attempting to formally address the issue of student impairment. However, several models have already been developed and successfully implemented in schools throughout the United States. Most models address three areas of concern; the development of a specific definition of either competence or impairment, the development or application of relevant evaluations based on the criteria of their definitions, and the legal rights of the students, the program, and the public. The earliest suggestions for gatekeeping policies were merely general guidelines, and focused on the program’s responsibility to first develop standards, evaluation guidelines, and remediation options, and then communicate those expectations to the students early in, and regularly throughout, the program (Lamb et al., 1987). Lamb et al. (1991) expounded on those original guidelines, suggesting the need for policies to be clearly written, and communicated to both students and faculty.

Impairment Evaluation and Review Model

Lamb et al. (1989, 1991) recommended a four-step process to address student impairment. The first step involves regular monitoring of students in the areas of professional standards, skills competency, and personal functioning. Monitoring allows faculty to
determine areas of concern, if any, and provide feedback to the student regarding those concerns. Should the behaviour(s) improve, no further action is required. However, should further attention be necessary, the second step involves consulting with additional faculty members regarding potential interventions by the program. This ensures that any remedial intervention is the result of a group decision, removing the risk of individual bias.

Step three involves an agreement on, and implementation of any remedial intervention, and a timely review of any student progress. Lamb et al. (1989, 1991) emphasize that due process require the program to ensure remediation options address the specific problem identified, that the length of the period for remediation be clearly stipulated, that students be made aware of their right to appeal any evaluation or termination decision, and that documentation of this process be thorough. The fourth step acknowledges the stress faced by those involved, and suggests strategies for supporting the impaired student, the faculty members involved in the process, and the faculty and student body in general.

*Personal Characteristics Evaluation Model*

The University of Colorado at Denver began addressing impairment by first developing a policy statement that highlights nine essential characteristics the faculty believed to be critical for the ethical and competent practice of psychology. These essential characteristics include the ability to be open, flexible, positive, and collaborative, the ability to accept and incorporate supervision, to be aware of one’s impact on others, and to accept personal responsibility, and the ability to tolerate disagreement and appropriately express thoughts and emotions. These criteria became the basis for the Personal Characteristics Evaluation Form, the assessment mechanism now used to evaluate students at admission, and on a bi-semestral basis (Frame & Stevens-Smith, 1995).
The program’s gatekeeping policy statement and evaluation form are included in the Student Handbook, which students often receive before admission and certainly at the beginning of their studies. Students are required to read and sign the handbook, thus agreeing to abide by the program’s policies. Interestingly, a second counselling program in the United States utilizes the Personal Characteristics Evaluation Form to regularly evaluate its students, with the purpose of encouraging personal growth and counsellor readiness as well as client safety (Jordan, 2002).

If a problematic behaviour surfaces, it is addressed through a formal three-step process, including written notification to the student regarding the area of concern, discussion among the faculty at a student review meeting regarding possible courses of action, and finally a meeting with the student. Remediation, if appropriate, is offered at that time. Should the problematic behaviour persist, or other problematic behaviours surface, remediation then becomes a requirement. The dialogue between faculty and student focuses on completion of the remediation requirements, and possible termination from the program. The student review committee, after considering the nature and number of negative evaluations as well as the outcome of any remediation, may dismiss the student from the program (Frame & Stevens-Smith, 1995).

Student Review and Retention Model

Baldo et al. (1997) expounded on the above model to develop a gatekeeping policy for the University of Northern Colorado, after facing a legal challenge to a student dismissal (Harris v. Blake, 1986). The policy highlights the need for documentation, due process, and the involvement of the entire faculty regarding dismissal decisions. Developed by the faculty and endorsed by the institution’s attorneys, the policy begins by defining unacceptable
behaviour as “an inability to demonstrate: empathic capacity, maturity of judgement, ability
to work closely with others, capacity to handle stress, and tolerance for deviance” (Baldo et
al., 1997, An alternative model, ¶ 1). It advises students that their behaviours may be judged
unsatisfactory at any time during their training, and outlines the procedures for probation,
remediation, dismissal, and appeal through 19 formal steps.

After being notified, in writing, of any concerns, a student has the opportunity to
discuss both the concerns and possible remediation plans with his or her faculty advisor and
the program’s Retention Committee. The student is required to sign the agreed-upon
remediation plan, which includes a description of the problem behaviour(s), the remediation
options, indicators of successful remediation, and a specific date for re-evaluation. The entire
faculty is responsible for decisions concerning the student’s ability to continue in the
program, and the student is notified both verbally and in writing (Baldo et al., 1997).

Process Model of Monitoring and Intervention

Bemak et al. (1999) described a five-step policy used to evaluate not only academic
results but both the personal and professional development of students in a counsellor
training program in the United States. Affirming the faculty’s belief in the importance of
psychological health, the policy begins by identifying characteristics the faculty deem
essential for professional counsellors. The five necessary qualities – which include “(a)
interpersonal sensitivity, (b) psychological-mindedness and the capacity for introspection, (c)
ability to express genuine empathy, caring, and positive regard, (d) freedom from unhealthy
interpersonal dynamics, and (e) a commitment to personal growth and the ability to pursue
personal counseling if needed” (Bemak, et al., 1999, p. 24) – are itemized in the school
catalogue and student handbook.
Thus, the first step involves communicating the program’s expectations and evaluation methods regarding the academic, personal, and professional development to its students. Step two involves the student’s signed agreement to the program’s identification, evaluation, remediation, and dismissal policies. For example, the student is made aware that appropriate behaviour will constitute a substantial portion of his or her grade in a course, and that any mark below a “B” in a practicum or internship course will result in immediate dismissal from the program.

The third step requires individual faculty members to evaluate their students on a bi-semesteral basis, and discuss any concerns with the student’s advisor, the Department Chair, and other faculty members at scheduled meetings. The student joins the discussion for the fourth step, where the problem behaviour is outlined and a remediation plan is developed. Students are reminded of the necessary characteristics required for a passing grade, their prior agreement to abide by those requirements, and their right to appeal any decision. The final step involves monitoring and evaluating the student’s progress based on the agreed-upon expectations, and the faculty’s decision to either maintain or dismiss the student.

*Professional Counselling Performance Evaluation Model*

Southwest Texas State University (SWT) developed a gatekeeping policy, and a standardized evaluation instrument, based on the American Counseling Association’s *Code of Ethics and Standards of Practice* (1995). The Professional Counselling Performance Evaluation (PCPE), also known as the Professional Performance Fitness Evaluation (Dar et al., 2003), assesses each student’s competence, integrity, counselling abilities, professional conduct, and “impulse control, anger control, empathy, maturity, professional demeanour, conflict resolution, and adherence to ethical standards” (Kerl et al., 2002, p. 328).
Notification of these behavioural expectations begins during the admission process, and continues throughout the program.

Evaluations occur at the end of every semester for each course, and a satisfactory evaluation is required to pass the course, regardless of the traditional academic grade achieved. Upon receipt of a negative evaluation, the student and Faculty Review Committee review the problem and determine a remediation plan. Should the student not meet the program’s expectations, the Faculty Review Committee may decide to dismiss the student. Documentation occurs throughout the entire process and students may appeal the decision at any juncture (Lumadue & Duffey, 1999).

Gatekeeping Policies Work

The advantages of having templates of gatekeeping policies are completely negated if they are not effective in both preventing impaired students from graduating and preventing dismissal decisions from being overturned through legal action. Thankfully, that is not the case. A review of the legal challenges to student dismissals reveals that formal gatekeeping policies vastly improved the program’s legal position in these cases. Moreover, the presence of formal policies allows faculty members to follow specific guidelines regarding problematic behaviours, thus enhancing their ability to be gatekeepers and reducing general student impairment rates (Gaubatz & Vera, 2006).

As well as promoting the personal and professional growth of their students, the student review and retention policy developed by the Division of Professional Psychology at the University of Northern Colorado ensures that any dismissal decisions consistently follow due process and involve the entire faculty. Baldo et al. (1997) cited two individual cases of dismissal that were upheld by the university, primarily owing to the documented steps of due
process followed by the program. Furthermore, SWT successfully navigated a lawsuit brought by a dismissed student in 1998, and attributed its victory to the PCPE, the faculty review committee, and formal gatekeeping procedures. The court applauded the due process and communication measures of their policy (Kerl et al., 2002).

At the University of Colorado at Denver, a sizeable majority of the faculty credit the gatekeeping policy in general, and the Personal Characteristics Evaluation Form in particular, with increasing its attention to, and purposefulness in evaluating students’ interpersonal fitness (Frame & Stevens-Smith, 1995). Indeed, formal gatekeeping policies in general have improved faculty attention toward, and follow-up with, impaired students. This increased attention and follow-through has resulted in reduced incidence of problematic behaviours in graduate programs in psychology (Gaubatz & Vera, 2002; 2006; Kerl et al., 2002; Procidano et al., 2005; Rosenberg et al., 2005). Gaubatz and Vera (2006) further claimed, “formalized review procedures may lead to reductions in gateslipping rates even among unaccredited and thinly staffed programs” (p. 37). In addition, citing the reduced number of negative evaluations since their policy’s implementation, Frame and Stevens-Smith (1995) suggested that the increased student awareness of the program expectations and evaluation procedures from early in the admission process may have dissuaded impaired students from entering the program. Early intervention and regular opportunities for both evaluation and remediation result in fewer impaired students reaching graduation (Lumadue & Duffey, 1999).

As well, a vast majority of students are willing to participate in remediation, if offered (Rosenberg et al., 2005), and some are even thankful. Recounting the response of a dismissed student who later expressed her gratitude to the program for helping her realize that psychology was not her passion, Jordan (2002) highlighted the positive aspect of
gatekeeping; that is, honouring the student’s genuine abilities, even when they are not suitable for the profession of psychology. Bemak et al. (1999) cited numerous benefits of their process model, including regular monitoring of student behaviours, timely feedback, increased communication among faculty regarding student progress, and clear delineation of responsibilities regarding impaired students. Regardless of the methods used in gatekeeping models, it appears that the critical factor in all cases is whether the policy exists at all. If the policy exists, if students are aware of the program’s requirements and are given an opportunity to rectify any problem, and if more than one faculty member is involved in the decision to dismiss a student, dismissal decisions are upheld in appeals, whether institutional or legal, resulting in fewer impaired students reaching graduation.

Recommendations

After a review of the gatekeeping literature, it is clear that there are graduate psychology students who are impaired, there are faculty members who are confused regarding their responsibilities to both the profession and their student, and there are psychology training institutions that have not implemented any formal policies to address these concerns. Several authors have offered advice for programs wishing to develop such policies. Frame and Stevens-Smith (1995) recommended that gatekeeping policies should protect the rights of both the faculty and the student, should aim to protect the public and the profession from impaired practitioners, and should adhere to both the profession’s code of ethics and all relevant laws.

Olkin and Gaughen (1991) suggested a three-step process for gatekeeping: (a) operationally define the program’s expectations for student behaviour, (b) provide students with written notification of those expectations, both at admission and at regular intervals
throughout the program, and (c) conduct regular evaluations, relevant to those expectation.
The following is a list of recommendations, directed at those programs interested in
developing gatekeeping procedures for the benefit of students, staff, and the profession. As
with any new policy, gatekeeping policies require review by the institution’s legal team, to
ensure the new policies adhere to applicable provincial laws and regulations.

Encourage Institutional and Faculty Commitment

Without the full support of both the educational institution and the program faculty,
any gatekeeping policy is doomed to fail. Both the institution and members of the faculty
need to first be committed to the idea that graduate schools of psychology have an obligation
to be gatekeepers for the profession. If there are doubts or hesitation about this particular
responsibility, those doubts will sentence even the most well-developed gatekeeping policy
to life on a shelf (McAdams III et al., 2007). It is imperative that the faculty is aware of, and
in agreement with, its responsibilities as gatekeepers for the profession. Faculty contributions
and cooperation, in consultation with the institution’s administration and legal teams, are
imperative to developing any policy that obliges members of the faculty to act (Jackson-
Cherry, 2006). Faculty contributions to the development of any policy can also ensure that
the policy is both practical and realistic.

Wilkerson (2006) proposed that any attempt at implementing a gatekeeping policy
could resemble the therapeutic process, which might make the notion of evaluation more
palatable to a faculty of psychologists. He suggests that any gatekeeping procedures follow
the commonly used therapeutic procedures; that is, “informed consent, intake and
assessment, evaluation, treatment planning and follow-up, and termination” (Wilkerson,
2006, p. 207). Psychologists, in general, are quite comfortable with this process. Linking the
therapeutic process to the gatekeeping process may assist those faculty members not yet at ease with their gatekeeping obligations.

**Determine Policy Statement**

Before embarking on the journey through the intricacies of policy development, a policy statement will provide useful guidance and direction for all involved. The statement should be written from a philosophy of developing academic, clinical, and professional competence, and should include the purpose of, and intention for, any policy. For example, it could outline the institution’s ethical obligations and responsibilities to the students, the public, and the profession. Perhaps student wellness, or impairment prevention, could be the philosophy and underlying objective of the gatekeeping statement (Lawson, Venart, Hazler, & Kottler, 2007; Smith, Robinson III, & Young, 2007; Roach & Young, 2007; Wilkerson, 2006; Witmer & Young, 1996).

Ultimately, the purpose highlighted in the statement will set the tone for the entire gatekeeping policy; accordingly, it should reflect the faculty’s philosophy regarding student impairment. In addition, the statement should establish a list of acceptable or, conversely, unacceptable student attitudes or behaviours specifically relevant to the practice of psychology, avoiding diagnoses and vague expectations (Oliver et al., 2004). This list should be supported by the faculty and the professional literature, and be consistent with the profession’s codes of ethics and current standards of practice.

**Develop Gatekeeping Policy**

Following the development of the policy statement, faculty must decide on the procedures for addressing student impairment. The policy must answer the following questions: (a) what standard assessment tool(s), if any, will be used, (b) what will be the
minimum requirements for both interpersonal competency and level of client care (Jordan, 2002), and (c) how often will students be evaluated? Early and frequent evaluations of every student provide the program with time to address problematic behaviours, thus preventing future issues (Alden et al., 1996). The policy should articulate the difference between an acceptable and unacceptable evaluation (see McLeod, 1992, for discussion on competence assessments), how many opportunities a student has to improve, and how many negative evaluations are allowed before dismissal is warranted.

Moreover, the statement should clarify who will be responsible for assessing the student, and who will be responsible for informing the student of the evaluation outcome. For example, will student assessment commence during the admission process, or will only admitted students be subject to evaluations? Childers and Rye (1987) described a two-day admission process for doctoral candidates that focuses on evaluating “counselling skills, level of professional knowledge, interpersonal effectiveness, and credentials” (p. 555). While increasing the demands of time on the faculty’s schedule, this process substantially enhances the screening process; that is, it allows non-traditional students to demonstrate their abilities, and vets any potentially impaired students. Comprehensive screening at the admission stage potentially saves the faculty from having to address student impairment within the program. Alternatively, Johnson and Campbell (2002) proposed that character and fitness evaluations be included alongside the traditional academic evaluations. Regardless of which option fits the program best, simply adding an interview to the admission process is not sufficient to prevent the enrolment of impaired students (Procidano et al., 2005).

In addition to determining the “who,” the “how,” and the “when” of student assessment, the policy should include a mechanism for coordination between on-site and off-
site supervisors, as impairments may surface during a practicum or internship. If the off-site supervisor is either uninformed, or confused about what the program considers acceptable behaviour, the potential exists for an impaired student to slip through that crack. Finally, as students are far more familiar than programs appear to be with the impairment of their peers (Mearns & Allen, 1991; Oliver et al., 2004; Rosenberg et al., 2005), perhaps there should be a mechanism in the policy, which would allow fellow students to report the problematic behaviours of their peers.

Establish Procedure for Impairment Management

If impairment is the problem, and to offer remediation is a potential solution, not to mention a legal obligation (McAdams III & Foster, 2007), a list of remediation options should be created, as problematic behaviours are unlikely to abate on their own (Alden et al., 1996). A review of the gatekeeping literature reveal a plethora of remediation options, including increased supervision, personal therapy, the development of a behavioural contract, weekly meetings with the student’s advisor, personal development courses or seminars, student support groups, additional course work, repetition of internship or practicum, a reduced client load, or a leave of absence from the program (Elman & Forrest, 2004; Forrest et al., 1999; Huprich & Rudd, 2004; Lamb et al., 1987; Olkin & Gaughen, 1991; Procidano et al., 1995; Rapisarda & Britton, 2007; Vacha-Haase, 1995; Vacha-Haase et al., 2004). A larger list of remediation options offers the opportunity for the program to tailor any remediation plan to the problematic behaviour being addressed, thus allowing the student a genuine chance for improvement. McAdams III and Foster (2007) highlighted the need for a remediation plan to be relevant, comparable in scope and severity, and corrective in intent. In addition, they suggested that the plan be fundamentally fair; that is, any remediation is part of
recognized practice, available to the student, and flexible for the student. Finally, time limits for progress should be set. Certainly, serial remediation for the same problem is not helpful.

Any negative evaluation should first be discussed with the student by either the faculty member responsible for the negative evaluation, the student’s faculty advisor, or both. The student should also be given the opportunity to have a support person at the meeting, to prevent the student from feeling outnumbered or intimidated. This informal meeting should include a discussion about the problematic behaviour and possible resolution, resulting in a signed agreement between the interested parties. Indeed, the importance of dates and signatures cannot be overstated, as it prevents either party from claiming ignorance regarding the occasion and content of the meeting.

Further recommendations include the creation of a faculty committee dedicated to addressing impairment, as a decision by more than one individual prevents allegations of personal bias as well as provides institutional support to both the student and the faculty member (Jordan, 2002). The faculty committee should receive a copy of both the negative evaluation and signed remediation agreement, and the student’s progress (or lack thereof) should be discussed at the next meeting. If the student is not progressing, or if the student receives more than one negative evaluation within the course of the program, a formal hearing should be scheduled and interested parties should be notified in writing. Depending on the severity of the evaluation, and the maximum number of negative evaluations and opportunities for improvement, the committee may initiate dismissal procedures. Once again, thorough documentation is essential.

Outline Appeals Process

While students agree to the gatekeeping evaluations before entering the program, they
retain the right to appeal any evaluative outcome. It is possible to develop guidelines regarding an appeals process. However, as graduate programs in psychology already have academic appeal policies in place, and problematic behaviours are considered academic issues, it seems practical to simply apply the existing policies to these additional evaluations. Many of the gatekeeping policies described above used their respective programs’ already operational academic appeals process to handle disputes over evaluations.

*Ascertain Informed Consent*

Once the above suggestions have been implemented, the program’s final obligation is to inform all interested parties. The faculty, any off-site supervisors, and the students should be informed of the new program standards and requirements. The program should formally introduce the new policies to the faculty at a meeting held prior to the policy commencement date. Ideally, the faculty will have been given the opportunity to contribute to the development of these new policies, reducing the amount of introduction necessary.

In addition, an annual workshop that reviews the program’s gatekeeping policy may be helpful. Any new gatekeeping literature, recent updates to provincial practice bulletins, and relevant court rulings may be reviewed at this workshop, ensuring the faculty are kept abreast of relevant ethical and legal requirements (Forrest et al., 1999; Vacha-Haase et al., 2004). Off-site supervisors and adjunct faculty should receive written notification of the new policies at the time they agree to become supervisors or instructors. Likewise, the program should require a signed agreement from off-site supervisors, indicating their agreement to participate in, and abide by, the program’s gatekeeping policies (Lamb, 1999); it may also be advisable to invite off-site supervisors to attend the annual policy review workshop. Finally, a member of the faculty committee responsible for gatekeeping issues should be available as
a liaison to all off-site supervisors, ready to address any questions or concerns regarding student impairment.

Prospective students should be provided with written notification of program standards. Admission materials, mailed to students who express an interest in applying to the program, should include information about the academic, personal, and professional requirements of the program. Once a student is offered admission to the program, he or she should be required to sign an agreement, consenting to the requirements of the program and his or her responsibilities regarding personal growth. The gatekeeping policies should be included in the student handbook, and reviewed during student orientation. Finally, the student should receive a copy of all evaluations, perhaps accompanied by the original signed consent form.

Gatekeeping is an ethical, moral, and even legal obligation for graduate programs in psychology. Encouraging faculty involvement, developing an underlying philosophy of gatekeeping, and outlining a step-by-step process provide faculty members with both permission and guidance to meet their gatekeeping obligations. In addition, it provides the students with due process, informed consent, and permission to focus on their personal growth as well as their academic grades.

Conclusion

Despite the above evidence to the contrary, the issue of student impairment is a relatively simple one. Are problematic behaviours in graduate psychology students acceptable? Are they ethical? Are they evidence of competence? Are therapist characteristics irrelevant to the practice of psychology? If the answer to any of these questions is yes, then our course of action is easy: Continue to do nothing.
However, if student impairment is not acceptable, we need to address it in a humane, ethical, and moral way. We can no longer afford to wait for the perfect policy, the perfect assessment, or the perfect set of remediation options before tackling this momentous problem. Of course, further research regarding valid assessment measures is required, as is a consensus on the essential characteristics of a psychologist. However, waiting to develop and implement gatekeeping policies until some ideal is reached is the equivalent of doing nothing.

Lamb et al. (1991) suggested that gatekeeping policies may not only prevent impaired students from becoming impaired practitioners, they may also improve the professional functioning of all involved, as professional competence becomes a focus. Enhancing the competency of all involved is just one of the many benefits of implementing gatekeeping policies in graduate programs in psychology in Canada. The profession of psychology is already in agreement: impairment is unacceptable. The development and implementation of gatekeeping policies provide graduate programs in psychology a unique opportunity to balance the training of students with the protection of clients (Jordan, 2002), while preventing impairment and honouring both the ideals of personal growth and the ethics of professional practice.
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