

Ethics 8 Series: Ethical Considerations for Working with People Affected by HIV/AIDS

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Human immunodeficiency virus (HIV) and acquired immune deficiency syndrome (AIDS), generally known as HIV/AIDS, continues to be a global pandemic that disproportionately affects vulnerable, oppressed, and marginalized individuals and communities. Despite great advancements over the years, there continues to be a persistent need for social workers to educate themselves to advance ethical treatment and practices when working with people and communities affected by HIV/AIDS. Although the NASW (2015) *Code of Ethics* does not expressly address HIV/AIDS, many standards therein provide guidance to assist social workers in sorting through the complexities of working with affected people and communities.

The following 8 ethical tips describe ethical considerations for social workers and provide guidance and resources to assist with promoting ethical practice when working with HIV/AIDS-affected people and communities.

Understand the facts about HIV/AIDS transmission, risk, and prevention.

The *Code of Ethics* requires that social workers strive to become and remain proficient in professional practice and the performance of professional functions. Social workers should critically examine and keep current with emerging knowledge relevant to social work (see standard [4.01b Competence](#)). Accordingly, when working with HIV/AIDS-affected people and communities, social workers should obtain training and consultation to promote awareness and understanding around the range of health and mental health issues of people living with HIV/AIDS, their families, communities, and the systems that intervene at all levels of practice. In addition, social workers should continuously update their knowledge about all aspects of HIV/AIDS disease, including new prevention strategies, treatment models, medication regimens, and policies.

Understand that HIV/AIDS disproportionately affects vulnerable, oppressed, and marginalized individuals and their communities.

In line with standard [1.05 Cultural Competence](#), workers should obtain education about and seek to understand the nature of social diversity and oppression, including the disproportionate and disparate risks of transmission of HIV/AIDS in vulnerable communities.

Practicing with cultural competency requires social workers to be aware that there are multiple structural barriers to the identification and treatment of HIV/AIDS. These include poverty, limited access to health and behavioral health care, lack of support for comprehensive sexuality education, irregular access to needle exchange programs and other prevention services, and under resourced community-based services. These barriers, primarily affecting vulnerable populations, contribute to increased risk of HIV/AIDS infection.

Don't discriminate.

According to standard [4.02](#) of the *Code of Ethics*, social workers should not practice, condone, facilitate, or collaborate with any form of discrimination on the basis of race, ethnicity, national origin, color, sex, sexual orientation, gender identity or expression, age, marital status, political belief, religion, immigration status, or mental or physical disability. This includes discrimination based on a client's HIV/AIDS status. Social workers should seek supervision as necessary to address any conflicts or concerns. Termination and referrals should only occur when another professional's specialized knowledge or expertise is needed to serve clients fully or when social workers believe that they are not being effective or making reasonable progress with clients and additional service is required to serve the clients' needs or interests (see standard [2.06a Referral for Services](#)).

Understand clients' right to self-determination and informed decision making.

Standard [1.02](#) states that social workers should respect and promote self-determination. This includes promoting self-determination in decision making related to HIV/AIDS testing and treatment decisions.

Social workers should not impose their personal values, but rather are responsible for ensuring that clients understand their options for HIV/AIDS testing and treatment. It may be necessary for the social worker to refer the client to another professional to assure that the client can make an informed choice. This is a consideration for all medical conditions but is of particular importance when it comes to working with people affected by HIV/AIDS.

When a client is making decisions about his or her goals in the context of the social work service relationship, it is the social worker's responsibility to assure that the client has and understands the complete information needed to provide informed consent or refusal (see standard [1.03a Informed Consent](#)).

Exercise sound professional judgment regarding confidentiality and interpreting and appropriately applying state reporting laws as they pertain to HIV/AIDS.

Despite medical advancements and a better understanding about how HIV/AIDS is transmitted, many jurisdictions uphold policies and laws requiring medical professionals including social workers to disclose the HIV/AIDS status of a client in instances when there is risk of transmission to others. Policy and legal guidance around disclosure and duty to protect as it relates to a client's positive HIV/AIDS status vary from state to state. It is critical to know if your state has laws and the implications for ethical decision making.

There is no specific ethical guidance in the NASW *Code of Ethics* pertaining to HIV/AIDS or other medical conditions. In general, social workers should protect the privacy and confidentiality of all clients' information. However, standards [1.01 Commitment to Clients](#) and [1.07 Privacy and Confidentiality](#) require that social workers be aware of and follow mandated reporting and duty-to-protect laws that may require a breach of confidentiality when a client has threatened to harm self or others or when disclosure is necessary to prevent serious, foreseeable, and imminent harm to a client or other identifiable person. Social workers are responsible for becoming knowledgeable about the role of the professional social worker in applying local, state, or federal laws pertaining to testing guidelines and reporting mandates relevant to HIV/AIDS status. Social workers should seek ethical, clinical, and legal consultation when the social workers' ethical obligations conflict with relevant laws or regulations. When a breach of client confidentiality is determined to be necessary, only information that is directly relevant to the purpose for which the disclosure is made should be revealed.

Respect clients' right to privacy—do you need to know?

Standards [1.07a Privacy and Confidentiality](#) and [3.04c Client Records](#) both address protecting clients' right to privacy when providing and documenting services. Social workers should carefully evaluate whether it is appropriate or necessary to inquire or require clients to disclose their HIV/AIDS status. If HIV/AIDS status is not the focus of treatment, and/or is not a specialty area of the social worker, the professional must determine and document why knowing a client's HIV/AIDS status is relevant to the services being provided. Knowing a client's HIV/AIDS status is necessary in limited situations, for example, for social workers in medical settings or who are members of medical treatment teams. Otherwise, HIV/AIDS is a chronic health condition that should be addressed in the course of social work practice as any other chronic medical condition. It is also important to note that the right to privacy and confidentiality extends to deceased clients (See standard [1.07r](#)).

Avoid the inherent conflicts of interest that can arise when working with HIV/AIDS-affected individuals.

Social workers who work with clients affected by HIV/AIDS may be faced with unique end-of-life considerations. Social workers must be cognizant of the potential boundary issues that may arise when requested to act outside of the scope of their social work practice responsibilities. These situations may involve requests to support clients and their families with end-of-life decisions such as attending or speaking at funerals, assisting with final arrangements, and execution of wills. These examples open the door for dual or multiple relationships wherein the social worker can find his or her role expanding into other specialty areas or roles such as estate planner, power of attorney, or friend. Standard [1.06 Conflicts of Interest](#) gives clear guidance to social workers to be alert to and avoid conflicts of interest. Social workers should take time to review this standard and obtain regular consultation and training around the boundary issues that may arise.

Strengthen ethical practice through professional development.

As key stakeholders in promoting social welfare and social justice (see standards [6.01](#) and [6.04](#)), social workers should advocate for policy that ensures programmatic and fiscal support of HIV/AIDS prevention, testing, and ongoing care and treatment. Social workers should take leadership in advocating for laws and regulations at local, state, and federal levels to improve the quality of life and promote social justice for all people living with and affected by HIV/AIDS. Leadership efforts should focus on promoting the need for HIV/AIDS programs, policies, and regulations to address the unique needs of youths; the aging population; women and girls; racial and ethnic minorities; lesbian, gay, bisexual, and transgender people; men who have sex with men; and long-term survivors of HIV/AIDS.

Resources

- Centers for Disease Control and Prevention (CDC), <https://www.hiv.gov/>
- HIV/AIDS Stigma & Discrimination, http://www.socialworkers.org/practice/hiv_aids/AIDS_Day2012.pdf
- NASW HIV/AIDS Spectrum Project Factsheets and Resources, http://www.socialworkers.org/practice/hiv_aids/default.asp
- National HIV/AIDS and Mental Health Training Resource Center, <https://hivmentalhealth.edc.org/>
- National HIV/AIDS Strategy and Social Work Role, http://www.socialworkers.org/practice/hiv_aids/nhaspolicytopracticeupdate2012.pdf

References

- National Association of Social Workers. (2015). *Code of ethics of the National Association of Social Workers*. Washington, DC: Author.
- Kaplan, L. E., & Bryan, V. (2009) *Teaching informed consent in social work education using an innovative model*. Journal of Social Work Values & Ethics