Addictions competence framework



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3 Addictions competence framework

1. Foundational competences

- **1.1.** Ability to draw on the understanding that addiction is not a moral or personal deficiency but has multiple influences on its cause and development.
- **1.2.** Ability to understand that addiction cannot solely be defined according to substance use, or behaviour, but should be considered in terms of the function of use and its impact on the person and those around them.
- **1.3.** Ability to draw on knowledge and understanding that there can be varying functions of addiction such as:
 - a. acting as a coping mechanism
 - **b.** to self-medicate, or
 - c. to self-soothe.
- **1.4.** Ability to understand the complex and interconnected nature of inequities, bias, stigma, and impact of stereotypes and prejudice attached to addictions.
- **1.5.** Ability to draw on understanding of the variability in the social or cultural acceptability of habitual use of different substances, or addictive behaviours.
- **1.6.** Ability to draw on understanding of the impact of social context on the availability and accessibility of substances, and how this impacts individual clients addictive behaviours.
- **1.7.** Ability to communicate empathic understanding, respect and acceptance of the person in their presenting state, whether in active addiction, or in the process of recovery.
- **1.8.** Ability to appraise and appreciate the diverse nature of addictions counselling, its varied evidence base, the theories, models, approaches and treatments associated with addictions counselling, and to be able to critically review one's own and emerging approaches to working with addictions.
- **1.9.** Ability to draw on the understanding that counsellors and clients learn from each other; clients learn from the counsellors' expertise and knowledge, and counsellors learn from the client's lived experience of addiction.
- **1.10.** Ability for practitioners to recognise and challenge their own personal and cultural values, biases and beliefs, and how these impact addictions counselling, treatment and recovery.
- **1.11.** Ability to draw on one's own and other counsellors attitudes towards addiction is crucial because the relationship between counsellor and client is at the heart of the work.
- **1.12.** Ability to identify and, where appropriate, use ways of working that differ from personally held views, including if relevant, the practitioner's own experience of addiction, treatment and recovery.

2. Knowledge competences

2.1 Knowledge and understanding of addictions

- **2.1.1** Knowledge of the biological, psychological, social and economic influences of addictions, and awareness of how these impact the lives of clients living with addiction.
- **2.1.2** Knowledge that a central part of the experience of addiction is persistent or intermittent addictive behaviour, often despite risk of substantial personal, physical and psychological, social or legal harms and repeated attempts to moderate addictive behaviours.
- **2.1.3** Knowledge of therapeutic models and practices that support recovery and behaviour change in relation to a range of substance and behavioural addictions.
- **2.1.4** Knowledge of clients' complex life histories preceding and during addiction, which may include substantial trauma and maltreatment.
- **2.1.5** Knowledge of clients' increased likelihood to have been in the past and/or currently involved in services and systems such as social care, mental health, debt, homelessness and criminal justice, and of the specific challenges faced by people who are, or have been involved in these services.
- **2.1.6** Knowledge of the changeability of trends and patterns in a range of addictive behaviours and of addictive substances.

2.2 Knowledge of the range of addictions services and treatment options available

- **2.2.1** Ability to draw on knowledge of the range of addictions services, for example community-based services, residential therapeutic services, detox and rehabilitation, addiction-specific support services, family therapy and mutual aid.
- **2.2.2** Ability to draw on knowledge of the range of interventions and supports available from addictions services and the commonly used practices involved in the assessment and treatment of addictions.
- **2.2.3** Knowledge and ability to draw on understanding of the place and value of medication and/or medically assisted treatments and support in the process of some addictions treatment and recovery approaches.
- **2.2.4** Ability to draw on knowledge of the role of the counsellor in different addictions service contexts and settings.
- **2.2.5** Awareness of a range of recovery and harm reduction initiatives and appreciation of contemporary debates within the field of addiction.

2.3 Knowledge and understanding of recovery in addictions counselling

- 2.3.1 Ability to draw on knowledge of recovery as a holistic approach, drawing on client strengths and resources to facilitate improvements in wellbeing, including where suitable access to recovery housing, peer-based mutual aid groups and peer-delivered interventions and the rediscovery of valued social roles.
- **2.3.2** Ability to draw on knowledge of the biological, psychological and social dimensions of recovery processes.
- **2.3.3** Ability to apply knowledge of the availability and access to a range of personal, social and community-based supports as vital to recovery.
- **2.3.4** Ability to apply knowledge of the client's own internal and external resources to support the process of change.
- **2.3.5** Ability to draw on knowledge of recovery as a process of change, which can encompass harm reduction, controlled use, or abstinence.
- **2.3.6** Knowledge of, and ability to work with, processes of change and to use evidence-based interventions to support recovery from addiction.

2.4 Knowledge of engagement issues specific to addictions counselling

- **2.4.1** Knowledge of social, cultural, economic and personal barriers that impact access to addictions counselling, for example ethnicity, age and stigma.
- **2.4.2** Knowledge of the interconnected nature of inequality, discrimination, and how prejudice and stigma experienced by individuals living with addictions may impact access to and engagement in addictions counselling.
- **2.4.3** Knowledge of effective partnership working and co-production of addictions support to enhance engagement and therapeutic outcomes.

2.5 Knowledge and understanding of the impact of co-occurring issues with addiction problems

- **2.5.1** Knowledge of the prevalence and impact of co-occurring mental and physical health problems commonly experienced by individuals living with addiction.
- **2.5.2** Knowledge and ability to apply understanding of the physical, psychological and social impact on clients living with co-occurring mental health and addiction difficulties.
- **2.5.3** Knowledge of the prejudices and inequities people living with addiction may experience within health services and the impact these may have on their recovery and, or safety.
- **2.5.4** Knowledge of, and ability to apply understanding that living with co-occurring mental health and addiction difficulties is associated with worse mental health outcomes, including an increased risk of self-harm and suicide.
- **2.5.5** Knowledge that those with mental health issues may engage in addictive behaviours to help them cope, or conversely addiction may trigger or influence the development of mental health issues.
- **2.5.6** Knowledge of, and ability to apply understanding that effective treatments for co-occurring mental health and addiction difficulties are best addressed by an integrated and formulation-based approach, where both issues are treated simultaneously.

3. Professional competences

3.1 Legal, professional and ethical practice

- **3.1.1** Ability to draw on knowledge of relevant legislation, legal guidance, ethical and professional guidance and policies that apply in the geographical locations, addictions settings and contexts in which counselling takes place.
- **3.1.2** Ability to draw on knowledge of current guidance for addictions interventions.
- **3.1.3** Ability to draw on knowledge of, and apply understanding of, how relevant laws and policies impact the lives of individuals living with addiction.
- **3.1.4** Ability to draw on knowledge of, and apply understanding of, the specific issues relating to risk and safeguarding that apply when working with clients living with addiction.

3.2 Equality, diversity and inclusion (EDI)

- **3.2.1** Ability to draw on knowledge of, and apply understanding of, the interconnected nature of inequalities and discrimination, taking account of different dimensions and intersections of diversity and multiple experiences that impact the lives of individuals living with an addiction.
- **3.2.2** Ability to draw on understanding of the cultural basis of a client's beliefs, attitudes and acceptance of treatment.
- **3.2.3** Ability to apply cultural sensitivity and an appreciation of the impact of culture in understanding client contexts, perspectives and experiences.
- **3.2.4** Ability to challenge prejudice, bias, stigma and fixed ideas about addiction, in oneself, the therapeutic process, other professionals and society as a whole to reduce their harmful effects.

3.3 Supervision and continuing professional development

- **3.3.1** Ability to recognise the importance of, and engage in, regular supervision with a supervisor who has expertise in addictions work.
- **3.3.2** Ability to maintain the capacity for reflexivity while undertaking addictions work.
- **3.3.3** Ability to apply understanding of concepts of vicarious trauma and be attuned to potential impact of hopelessness, burnout or apathy, and to be able to use professional support to identify measures that foster self-care.
- **3.3.4** Ability to recognise the importance of regularly updating and applying understanding of developments in contemporary research to inform addictions counselling.

4. Engagement and assessment competences

4.1 Engagement in addictions counselling

- **4.1.1** Ability to approach addictions counselling with an appreciation of clients multiple contributing experiences, such as abuse, trauma and/or exploitation, rather than a singular lens of problematic use or behaviour.
- **4.1.2** Ability to support clients who are uncertain about engaging in addictions counselling and, where there are barriers to engagement, ensure clients are assured they can re-engage when they feel ready.
- **4.1.3** Ability to apply understanding of the potential fears and barriers to accessing addictions counselling encountered by individuals and groups.
- **4.1.4** Ability to understand that clients' recognition and disclosure of the extent and nature of their addiction are often gradual processes.
- **4.1.5** Ability to understand and respond to clients' changing needs, including their capacity to engage in addictions counselling.
- **4.1.6** Ability to engage clients in discussion about addictions support and to be able to communicate clearly and in plain language the range of addictions services and treatment options available specific to the addiction, or problematic behaviour.
- **4.1.7** Ability to draw on knowledge of the clients' culture and history, with the aim of facilitating engagement in addictions counselling.
- **4.1.8** Ability to draw on understanding of the potential adverse impact of addictions screening and assessment on client engagement in addictions counselling, while bearing in mind the client's readiness to change.

4.2 Assessment in addictions counselling

- **4.2.1** Ability to use an initial and ongoing assessment strategy for addictions that is comprehensive, considers the overall pattern of use or behaviour, and draws upon theory of the development and progression of addictions.
- **4.2.2** Ability to apply specialist addictions knowledge to assess the symptoms, severity and signs of withdrawal or intoxication, where relevant to the nature of the addictive behaviour(s).

- **4.2.3** Ability to recognise and act when clients may require urgent medical attention.
- **4.2.4** Ability to draw on knowledge of a range of relevant screening and outcome monitoring tools.
- **4.2.5** Ability to facilitate signposting and referral pathways to other appropriate addictions services, including safeguarding and medical management where relevant.

4.3 Formulation in addictions counselling

- **4.3.1** Ability to work with clients to develop an understanding of the origins and maintenance of the addiction, and their personal and social resources and strengths.
- **4.3.2** Ability to conceptualise or formulate the most appropriate ways of working with client's thoughts, emotions, behaviours and other processes.
- **4.3.3** Ability to co-create an appropriate and agreed action plan that addresses the addiction helpfully and in a way that is acceptable to, and achievable by the client.
- **4.3.4** Ability to conceptualise, evaluate and take account of a range of addiction problems, triggers for addictive behaviour, functioning and coping styles (with due understanding of cultural norms), during assessment and throughout therapy.
- **4.3.5** Ability to explore in detail the client's situation, history and triggers for addictive behaviour, in order to offer a formulation that the client can understand, and that supports the process of change and recovery from addiction.
- **4.3.6** Ability to use the formulation to identify when and how to begin to create change and interrupt the unhelpful thoughts, emotions, behaviours and other social and/or unconscious processes that maintain addiction problems.
- **4.3.7** Ability, in partnership with the client, to review and revise the formulation, taking account of client reactions and responses to therapy, akin to an unfolding story that guides the therapy throughout.

4.4 Negotiating the agreement for addictions counselling

- **4.4.1** Ability to agree appropriate boundaries in addictions counselling relevant to addictive behaviour(s) for example, not engaging in the addictive behaviour before or during the counselling sessions.
- **4.4.2** Ability to work collaboratively to co-construct an agreement for the work that assists the client in setting short- and long-term goals for supporting change in addictive behaviour.

4.5 Managing risk in addictions counselling

- **4.5.1** Ability to draw on knowledge and apply understanding of a range of biological, psychological, social and legal addiction-related risks and harms.
- **4.5.2** Ability to draw on knowledge and apply understanding of existing and potential or emerging risk. This includes but is not limited to:
 - **a.** Increased risk of exploitation by others due to the addiction;
 - b. Increased risks of accidents and misadventure;
 - **c.** Awareness of the risks associated with withdrawal and symptoms related to rapid reduction or cessation of severely dependent substance use
 - **d.** Increased risk of cognitive impairment due to prolonged alcohol/substance use
 - e. Increased risks of personal and professional reputational detriment as a result of the addiction;
 - **f.** Increased risks of self-harm or suicidal behaviours either directly due to the addiction or as a consequence of the addiction.
- **4.5.3** Ability to enable clients to recognise and implement a risk management plan and appropriate prevention strategies to mitigate these risks.
- **4.5.4** Ability to devise and use a comprehensive risk assessment, risk management strategy and safeguarding procedures for addictions counselling that supports the safety of the client as paramount.
- **4.5.5** Ability to draw on knowledge and apply understanding of the links between addictions and increased risk of offending-related behaviour and how this may impact client engagement and focus.
- **4.5.6** Ability to assess and manage issues associated with endings in addictions counselling, such as relapse and other associated risks.

5. Therapeutic competences

5.1 Ability to work therapeutically with clients living with addiction

- **5.1.1** Ability to engage clients in exploring opportunities and motivations to change addictive behaviours.
- **5.1.2** Ability to work with ambivalence to change patterns of behaviour and relationships that maintain addiction behaviours.
- **5.1.3** Ability to work with clients to constructively challenge unhelpful beliefs and self-defeating behaviours that can maintain addiction problems.
- **5.1.4** Ability to move beyond an immediate focus on addictions to encourage exploration of underlying emotional issues, such as shame and guilt.
- **5.1.5** Ability to support client safety and promote client autonomy with those who may have experienced significant trauma and maltreatment preceding and during addiction.

5.2 Maintaining therapeutic gains and relapse prevention

- **5.2.1** Ability to build on clients' positive coping skills to self-manage and promote self-efficacy in maintaining changes in addictive behaviour(s).
- **5.2.2** Ability to respond sensitively to occassions, where for example, clients may have engaged in the addictive behaviour between counselling sessions, while maintaining the integrity of the therapeutic relationship.
- **5.2.3** Ability to enable clients to identify risk factors for relapse and implement appropriate prevention strategies to manage addictive behaviour(s).

5.3 Counselling family members or significant others of those living with addiction

- **5.3.1** Ability to understand and respond sensitively to clients who may be seeking counselling with the expectation of supporting the addicted person to manage the addictive behaviour(s).
- **5.3.2** Ability to draw on knowledge of and apply understanding of the adverse psychological, financial and physical health impacts of living with a person with an addiction.
- **5.3.3** Ability to recognise impacts on the relationship of living with a person living with an addiction and explore effects on current ways of coping.
- **5.3.4** Ability to recognise that living with individuals who are living with an addiction can cause considerable stress for family members and significant others, who are often at the forefront of providing support and may have a central role to play in the treatment and recovery process.
- **5.3.5** Ability to develop clear boundaries regarding confidentiality and disclosure with family members, significant others, employers and professionals who may have a stake in the treatment outcomes of the person living with an addiction.

6. Meta-competences

- **6.1** Ability to use professional judgment to develop a comprehensive understanding of each person's addictions and their potential origins that is informed by a coherent theoretical approach.
- **6.2** Ability to judge the strengths and limitations of own counselling approach in relation to the person, their environment and severity of addiction.
- **6.3** Ability to adjust the pace of interventions to respond to the changing needs of the client throughout the various stages of the therapeutic relationship, taking account of past treatments and client preferences, client strengths and resources, feedback from the client and relevant risk factors.
- 6.4 Ability to judge when addictions counselling needs to be supplemented by risk reduction, raising safeguarding concerns, or implementing safeguarding procedures.
- 6.5 Ability to judge when to deliver structured or less structured interventions, according to the needs of the client.
- 6.6 An ability to use ethical judgment to sensitively manage professional boundaries and any transgressions, managing dual relationships while avoiding unhelpful self-disclosure.