

<https://www.naadac.org/code-of-ethics>

Introduction to NAADAC/ NCC AP Ethical Standards

Ethics are generally regarded as the standards that govern the conduct of a person. Smith and Hodges define ethics as a “human reflecting self-consciously on the act of being a moral being.” This implies a process of self-reflection and awareness of how to behave as a moral being. Some definitions are dictated by law, individual belief systems, religion or a mixture of all three.

NAADAC recognizes that its members and certified counselors live and work in many diverse communities. NAADAC has established a set of ethical best-practices that apply to universal ethical deliberation. Further, NAADAC recognizes and encourages the notion that personal and professional ethics cannot be dealt with as separate domains. NAADAC members, addiction professionals and/or licensed/certified treatment providers (subsequently referred to as addiction professionals) recognize that the ability to do well is based on an underlying concern for the well-being of others. This concern emerges from recognition that we are all stakeholders in each other's lives - the well-being of each is intimately bound to the well-being of all; that when the happiness of some is purchased by the unhappiness of others, the stage is set for the misery of all. Addiction professionals must act in such a way that they would have no embarrassment if their behavior became a matter of public knowledge and would have no difficulty defending their actions before any competent authority.

The NAADAC/NCC AP Code of Ethics was written to govern the conduct of NAADAC's members and it is the accepted standard of conduct for addiction professionals certified by the National Certification Commission for Addiction Professionals (NCC AP). The code of ethics reflects ideals of NAADAC and its members, and is designed as a statement of the values of the profession and as a guide for making clinical decisions.

When an ethics complaint is filed with NAADAC or NCC AP, it is evaluated by consulting the NAADAC/NCC AP Code of Ethics. This code is also utilized by state certification boards and educational institutions to evaluate the behavior of addiction professionals and to guide the certification process.

Updated NAADAC/NCC AP Code of Ethics

The [NAADAC/NCC AP Code of Ethics](#), the most recent version of which is **effective January 1, 2021**, was updated to meet the needs of current addictions practice. It is **a completely new document**; built from the ground up with major enhancements and additions to the previous version. Standards were replaced with Principles and each Principle considered clinician, supervisor, and relevant others. It provides in-depth, clear guidance and direction to individual providers, service organizations, regulatory boards, educators and trainers, legislators, and other related parties. *The [2021 NAADAC/NCC AP Code of Ethics](#) replaces the [2016 NAADAC/NCC AP Code of Ethics](#).*

The [2021 NAADAC/NCC AP Code of Ethics](#) is arranged as follows:

Introduction to NAADAC/NCC AP Ethical Standards

Principle I: The Counseling Relationship

Principle II: Confidentiality and Privileged Communication

Principle III: Professional Responsibilities and Workplace Standards

Principle IV: Working in a Culturally Diverse World

Principle V: Assessment, Evaluation, and Interpretation

Principle VI: E-Therapy, E-Supervision, and Social Media

Principle VII: Supervision and Consultation

Principle VIII: Resolving Ethical Concerns

Principle IX: Research and Publication

Principle I: The Counseling Relationship

Client Welfare

Addiction professionals shall accept their responsibility to ensure the safety and welfare of their client, and shall act for the good of each client while exercising respect, sensitivity, and compassion. Providers shall treat each

client with dignity, honor, and respect, and act in the best interest of each client.

I-2 Informed Consent

Addiction professionals shall ensure that each client shall be fully informed about treatment, and shall provide clients with information in clear and understandable language regarding the purposes, risks, limitations, and costs of treatment services, reasonable alternatives, their right to refuse services, and their right to withdraw consent within time frames established within the consent. Providers shall review with their client, both verbally and in writing, the rights and responsibilities of both the provider and the client. Providers shall have the client attest to their understanding of the information presented in the Informed Consent by signing the Informed Consent document.

I-4 Limits of Confidentiality

Addiction professionals shall clarify the nature of their relationship with each party, and the limits of confidentiality, at the outset of services when agreeing to provide services to a person at the request or direction of a third party.

I-5 Diversity

Addiction professionals shall respect the diversity of clients and provide culturally-responsive and culturally-sensitive services to all clients.

I-9 Multiple Therapists

Addiction professionals shall obtain a signed Release of Information (ROI) from the client if the client is working with another substance use or mental health professional. The ROI shall allow the provider to establish a collaborative professional relationship.

I-10 Boundaries

Addiction professionals shall consider the inherent risks and benefits associated with moving the boundaries of a counseling relationship beyond the standard parameters. Providers shall obtain consultation and supervision, and recommendations shall be documented.

I-11 Multiple/Dual Relationships

Addiction professionals shall make every effort to avoid multiple relationships with a client. When a dual relationship is unavoidable, the professional shall take extra care to ensure professional judgment is not impaired and there is no risk of client exploitation. Such relationships shall include, but are not limited to, members of the provider's immediate or extended family, business associates of the professional, or individuals who have a close personal relationship with the professional or the professional's family. When extending these boundaries, providers shall take appropriate professional precautions such as informed consent, consultation, supervision, and documentation to ensure that their judgment is not impaired and no harm occurs. Consultation and supervision shall be obtained, and the recommendations shall be documented.

I-18 Level of Care

Addiction professionals shall provide their client with the highest quality of care. Providers shall use ASAM or other relevant placement criteria, to ensure that clients are appropriately and effectively served.

I-22 Exploitation

Addiction professionals shall be aware of their influential positions with respect to clients, trainees, and research participants, and shall not exploit the trust and dependency of any client, trainee, or research participant. Providers shall not engage in any activity that violates or diminishes the civil or legal rights of any client. Providers shall not use coercive treatment methods with any client, including threats, negative labels, or attempts to provoke shame or humiliation. Providers shall not impose their personal,

religious, or political values on any client. Providers shall not endorse conversion therapy.

I-23 Sexual Relationships

Addiction professionals shall not engage in any form of sexual or romantic relationship with any current or former client, nor shall they accept as a client anyone with whom they have engaged in a romantic, sexual, social, or familial relationship. This prohibition shall include in-person and electronic interactions and/or relationships. Addiction professionals shall be prohibited from engaging in counseling relationships with friends or family members.

I-42 Virtual

Addiction professionals shall be prohibited from engaging in a personal or romantic virtual e-relationship with all current and former clients.

I-26 Abandonment

Addiction professionals shall not abandon any client in treatment. Providers who anticipate termination or interruption of services to clients shall notify each client promptly, and shall seek transfer, referral, or continuation of services in accordance with each client's needs and preferences.

Principle III: Professional Responsibilities and Workplace Standards

III-13 Scope of Practice

Addiction professionals shall only provide services within their scope of practice and competency, and shall only offer services that are science-based, evidence-based, and outcome-driven. Providers shall engage in counseling practices that are grounded in rigorous research methodologies. Providers shall maintain adequate knowledge of and adhere to applicable professional standards of practice.

III-14 Boundaries of Competence

Addiction professionals shall only practice within the boundaries of their competence. Competence shall be established through education, training, skills, and supervised experience, state and national professional credentials and certifications, and relevant professional experience.

III-18 Self-Monitoring

Addiction professionals shall continuously self-monitor in order to meet their professional obligations. Providers shall engage in self-care activities that promote and maintain their physical, psychological, emotional, and spiritual well-being.

II-37 Impairment

Addiction professionals shall recognize the effect of impairment on professional performance and shall seek appropriate professional assistance for any personal problems or conflicts that may impair work performance or clinical judgment. Providers shall continuously monitor themselves for signs of physical, psychological, social, and emotional impairment. Providers, with the guidance of supervision or consultation, shall obtain appropriate assistance in the event they are professionally impaired. Providers shall abide by statutory mandates specific to professional impairment when addressing one's own impairment.

Principle IV: Working in a Culturally Diverse World

IV-1 Respect

Addiction professionals shall be knowledgeable and aware of diverse cultural, individual, societal, and role differences amongst the clients they serve in a diversity of settings along the continuum of care. Providers shall offer services that demonstrate appropriate respect for the fundamental rights, dignity and worth of all clients.

IV-4 Personal Beliefs

Addiction professionals shall develop an understanding of their own personal, professional, and cultural values and beliefs. Providers shall recognize which personal and professional values may be in alignment with or in conflict with the values and needs of the client. Providers shall not use cultural or values differences as a reason to engage in discrimination. Providers shall obtain supervision and/or consultation to address areas of difference and to decrease bias, judgment, and micro-aggressions, and shall document the recommendations.

Principle VI: E-Therapy, E-Supervision, and Social Media

VI-13 Boundaries

Addiction professionals shall maintain a professional relationship with their clients/supervisees. Providers shall discuss, establish and maintain professional therapeutic boundaries with clients/supervisees regarding the appropriate use and application of technology, and the limitations of its use within the counseling/supervisory relationship. Providers shall be aware of the unique risks for boundary crossings associated with the e-delivery of services.

VI-20 Social Media

Addiction professionals shall clearly explain to their clients/supervisees, as part of informed consent, the benefits, inherent risks, including lack of confidentiality, and necessary boundaries surrounding the use of social media. Providers shall clearly explain their policies and procedures specific to the use of social media in clinical relationships with the client/supervisee. Providers shall respect the client's/supervisee's rights to privacy on social media, and shall not investigate the client/supervisee without prior consent.