

**Co-operation Group to Combat Drug
Abuse and Illicit Trafficking in Drugs**



P-PG/Med (2017) 11

Final Report

PHASE II

***Development of “Training Accreditation & Certification Board for Addiction
Counsellors”***

The aim of Phase II of this project is to lay down the criteria for accreditation and certification of addiction counsellors in Egypt. Training of counsellors should include the optimum requirements for focused training in the field, logistics and the framework needed to establish a national board for training accreditation and certification of drug addiction counsellors.

The process must include the following:

- A) Accreditation of Institutions that serve as training centres for addiction counsellors;
- B) The Certification Process of Addiction Counsellors and Addiction Counselling Supervisors;
- C) Formation of the Regulatory Board overseeing the implementation and development of Accreditation (A) and Certification (B).

This report summarizes the practical aspects and components of these processes.

Sources and Actions Taken to Prepare the Report:

Task I A: Desk Review of the available Accreditation and Certification Systems.

Objective: Review the available Criteria of Accreditation and Certification and prepare the materials for phase II: The Team consisted of the Project Coordinator (Head), four professionals from the Addiction, Training and Research Units of the Mental Health Secretariat, along with six experts from academic departments, private sector and NGOs.

Action plan for task I:

- I. In depth study of all the outcomes of phase I;
- II. Extraction of the international criteria of Certification and Accreditation ;
- III. Consideration of the Colombo Plan Asian centre for certification and Education;
- IV. Critical appraisal of different programs;
- V. Adding Cultural perspectives to the different programs.

In phase I: establishment of scientific committee consisted of eight experts from different universities, ministry of health, NGOs, recovering addicts worked together and reviewed the situation of addiction counselling in Egypt (practices, training and legalization). They discussed the development of the scientific board for the foundation of the board "Training accreditation & certification board for addiction counsellors".

The areas that has been discussed and reviewed;

- Revision of the counselling Practice In Egypt;
 1. Collection of the discrete Egyptian efforts for training the addiction Counsellors;
 2. International counsellors training programs;
 3. Required criteria for selecting candidate to join the counselling programs;
 4. Criteria for institutions to be potentially accredited places for training of addiction counsellors;
 5. Egyptian Laws for regulating counsellors Practice;
 6. Proposed mechanisms for transition period before full application of regulation measures for certification.

Significant Outcomes of Phase I

In this phase the revision of the worldwide experience in addiction counselling and a study for the actual practices and training in Egypt have been done.

Outcome of the experts Meeting For 2 months

After revision of the situation in Egypt and the International curriculum the following have been concluded:

- Accredited program for addiction counsellors in Egypt should include the two main dimensions of training: theoretical and practical parts
- Necessary transitory criteria for having the legible trainers and the expert supervisors
- Identifying criteria for certified places to be accepted as legible (accredited) places for practical training

Also, this phase of the project aimed to evaluate the real current status of the addiction counselling in Egypt. This was executed through two questionnaires aimed at counsellors (n=100) and clients (n=125). The study concluded that there are no defined counsellor criteria or certification process in Egypt. There have been many trials of acquiring knowledge on individual bases; also there are many courses and workshops to cover some parts of knowledge. Another important issue is the lack of formal frame for the practical training and supervision.

SWOT analysis of the situation in Egypt was done declaring that:

- The strengths of current practice of drug counselling in Egypt
 - Egypt has an established body of practitioners.
 - Those working in the field of addiction medicine come from different backgrounds and proved their ability to develop alliance with clients and to gain trust of their clients.
 - The field of addiction psychiatry is rapidly growing as a subspecialty in EGYPT.
 - The field attracts many recovering addicts who found double benefit in the field of established job and reinforcement their own recovery. Thus, the number of those working in the field is increasing.
 - Also, in Egypt management of substance dependence is located in a wide variety of places including residential and community based, governmental and private and university hospitals. Many of these could be potential places for practical training.
 - Concerning training activities, there are some experiences of theoretical training programs in substance dependence counselling Egypt. Those include Arabic translated material such as Treatnet Program which can be considered as a potential good resource to build on the next step.
 - Many NGOs include the addiction counselling in their programs. Psychotherapy and counselling training programs are available through many of the NGOs; which if directed well can add to the skills of the counsellors.
 - Moreover, there is a model for the Clinical psychotherapist licensing law. This law can be a model for the licensing of recovering addicts counsellors.
- Weaknesses of current practice in drug counselling in Egypt
 1. Great deficiency in the organized comprehensive programs that include the practical skills training dimension required for counselling.
 2. Educational materials (programs) need to be in Arabic and culturally sensitive so will be the exams.
 3. Required hours for training programs are very difficult to fulfil taking into consideration the scarcity of the programs that can be certified for training (number of hours has to be no more than 2000).
 4. Scarcity of resources as some recovering addicts might need sponsorship.
 5. Most important is the lack of system for supervision on practice and practical training, and if it was available there is no consequences for not following the system and sit for it. Absence of acknowledged qualified personal supervisors who are very important to develop the body the practical aspect of counselling training.
 6. Also there is no organized committee that can be responsible for following the counselling supervision and also for making evaluation and licensing for the counsellors.

7. The code of ethics of behaviour is not clear in the practice as it is not trained well. There is no specific law for organizing the profession of counselling in general and addiction counselling in particular.
8. Currently, the training places are very limited.
9. We do not have the accreditation body for assessing places and choosing the eligible places for training practice.

- Opportunities of current practice in drug counselling in Egypt based on the facts that

- Drug addiction and alcoholism are on the rise.
- The profession of addiction counselling is attractive for many recovering addicts and their family members.
- Many addiction treatment centres are supposed to be established in the coming few years.

- Threats of current practice in drug counselling in Egypt

- The Absence of accredited recognized training leading to role confusion and inadequate job description of members of the addiction health providers' team.
- Also the weakness of the awareness of code of ethics of practice might put the patients at risk of malpractice.
- Stigmatizing culture to any person having history of addiction might make some prejudice toward recovering addict, especially those working in the field of addiction management.
- Delay in the development of counselling practice guidelines and supervision might maintain the malpractice and abuse to the substance dependence patients.
- Working as a part of referral network and establish rapport with referral agencies is sometimes a problem for recovering addicts.
- Inability to maintain healthy boundaries and encourages healthy boundaries in others, as this might threaten the recovery of the counsellor.

Phase I: ended with agreement on the following Outcomes

- The need to Organize a comprehensive Egyptian training program for Chemical Substance Counselling that is culturally sensitive, available in Arabic language for those who are not fluent in English particularly the theoretical components.
- The necessity of developing a system for practical training in accredited places comparable to the international standards to acquire the different needed skills and monitor the application of the codes of practice. Such system aims to provide certain standard that chemically dependency counsellors must fulfil to work in the field.
- The importance of considering the cultural responsive set of ethical standards that contain adequate guidelines for ethical behaviour in every possible situation that can be encountered in counselling relationships, ethics of the profession, and the relationship of the moral standards and values, individual and cultural . These guidelines will help place specific practices within framework of the general objectives and goals of the profession, and limit activities that are contrary to these goals.
- The need to organize programs for selection and training then Licensing Supervisors. The calibre of acknowledged supervisors will be responsible for the practice supervision and evaluation.

- Developing committee to evaluate accredited places for practical training.
- Establishing the Certification Board for designing assessment exams that test the acquired knowledge. The Board also evaluates continuous professional development and supervision as a requirement for renewal of certification. This board will be responsible for granting and renewal of certification after fulfilment of the required criteria.

Phase II: Development of training Curriculum for addiction Counsellors & Accreditation Framework

Task 1 A: Desk Review of Available curriculum

The field of treatment of substance use disorder in Egypt received so much attention and concerns from the highest governmental levels. The action plan of management of substance use disorder should acquire the same standards and requirements as the general health field. This included the need for documentation and codifies its services and service delivery systems. Moreover, the Egyptian Mental health act is recently modified for the sake of giving mental patient as well as the SUD patients the ultimate rights of receiving the best service, includes the best codes of professional mental health practice and qualifications. All this signify that the environment is prepared for the welcome the qualification and legislation of the situation of those working in the SUD counsellors.

Internationally, counsellor certification becomes an important strategy to legitimize the field and document that individuals are qualified to provide treatment and counselling services. The professional standards that guide counsellors working with SUDs patients are based on founding codes of agreement about recognized qualifications and competencies.

In the early 1980s, with support from the National Institute of Alcohol Abuse and Alcoholism, a coalition of trade and advocacy groups collaborated to develop credentialing guidelines and specify 12 core competency areas (Birch and Davis Associates, Inc., 1984).

The Certified Addiction Counsellor designation is a professional, counsellor-level credential for persons who are providing direct alcohol and other drug abuse counselling to patients seeking to achieve and maintain recovery from substance use disorders.

International licensing requirements vary greatly for addictions counsellors between countries. In UK and different states of USA, there are several levels of certification, each with different standards. Most countries have minimum education-levels and experience prerequisites, in addition to successful completion of a licensing exam. Continuing education in the form of workshops or in-service training may be required to maintain license.

Certification procedure described as being voluntary and not obligatory in Georgia. In most cases Addiction Counsellors Association Certification Board awards the certificate after the applicant has successfully completed the certification procedure. Certification may be awarded to those counsellors who demonstrate through the application/certification process, adequate experience, skills, knowledge, and competency in chemical dependency/abuse counselling.

Individuals holding an active Certified Addiction Counsellor (CAC) credential are recognized to have completed content-specific training and have demonstrated core competency through supervised on- the-job work experience providing addiction counselling services. The CAC requires a minimum of a high school diploma or general equivalency degree, 270

hours of content-specific training and anywhere from one to three years of supervised work experience (number of hours varies depending on formal education). The CAC is issued based on progression through the certification process of application, written examination, and written case history method. Individuals eligible to hold the CAC credential have demonstrated competency through training, experience and clinical supervision in the performance domains of addiction counselling which include assessment and evaluation, prevention and education (Addiction Technology Transfer Centre Network).

Role of addiction counsellors: Professional counselling of people with substance use disorders consists of the application of general counselling theories and treatment methods adopted with the express purpose of treating alcohol and drug problems. Effective treatment can lead to a life of recovery and enhanced social, psychosocial, or bio-psychosocial functioning of individuals, couples, families, groups, organizations, and communities. Activities of a counsellor within this field are based on the practice dimensions include the following:

1. Clinical Evaluation
2. Treatment Planning
3. Referral
4. Service Coordination
5. Counselling
6. Client, Family, and Community Education
7. Documentation
8. Professional and Ethical Responsibilities

The Scopes of Practice of drug counsellors was developed under the same definition of the Federation of State Medical Boards (FSMB), as follows:

“...definition of rules, regulations, and the boundaries within which a fully qualified practitioner with substantial and appropriate training, knowledge, and experience may practice in a field of medicine or surgery or other specifically defined field. Such practice is also governed by requirements for continuing education and professional accountability.”

The scope of practice of substance use professional includes a full range of responsibility and practice, from entry level to clinical supervision. Addiction counsellors play important role among the team members in social and modified-medical model recovery homes, hospital Alcohol/Drug treatment units, correctional facilities, and outpatient programs, residential treatment/care facilities. At these places, the counsellors' role primary focus of treatment is on learning skills to control impulses to maintain abstinence and on developing new interpersonal skills, personal accountability, responsibility, and improving self-esteem. On the other hand, in long-term residential treatment programs, they have rules and activities designed to help residents examine dysfunctional beliefs about self and others, and destructive patterns of behaviour and assist them to adopt new and more effective ways to interact with others.

It was noticed that individuals who are themselves in recovery such as former residents of a similar program can be valuable role models for the residents. Preferably they have had a job outside a treatment program before they are hired as staff. They should also have followed a professional training as a counsellor or group worker. There should be a strict code of ethics for the staff. UNODC STANDARD OF CARE

Categories of drug counsellors

The counselling to substance use disorder is compiled by Substance Abuse and Mental Health Services Administration (SAMHSA 2011) into 5 categories according to the qualification of each category. Such categorization is reflected upon the scope of practice of each group. They include:

- Independent clinical substance use disorder counsellor/supervisor
- Clinical substance use disorder counsellor
- Substance use disorder counsellor
- Associate Substance use disorder counsellor
- Substance use disorder technician

The following table summarize the difference and similarities between these categories as regards their job descriptions, responsibilities and duties; with a noticeable stepladder grading in the scope of practice.

Table (1) Job description and scope of practice of categories of substance use counselling providers

	Independent clinical substance use disorder counsellor/supervisor	Clinical substance use disorder counsellor	Substance use disorder counsellor	Associate Substance use disorder counsellor	Substance use disorder technician
Clinical evaluation	Screening, assessment, and diagnosis of Substance Use Disorders (SUDs) and Co-Occurring Disorders (COD	Screening, assessment, and diagnosis of Substance Use Disorders (SUDs) and Co-Occurring Disorders (COD	Diagnostic impression or Screening, Brief Intervention, and Referral to Treatment Referral (SBIRT)	Diagnostic impression, and Screening, Brief Intervention, Referral to Treatment (SBIRT)	Diagnostic impression, and Screening, Brief Intervention, Referral to Treatment (SBIRT)
Treatment	Planning for SUDs and CODs, including initial, on-going, continuity of care, discharge, and planning for relapse prevention	Planning for SUDs and CODs, including initial, on-going, continuity of care, discharge, and planning for relapse prevention	Planning for SUDs and CODs, including initial, on-going, continuity of care, discharge, and planning for relapse prevention	Monitor treatment plan/compliance	Monitor treatment plan/compliance
Referral	Referral	Referral	Referral	Referral	Referral
Service Coordination and case management in the areas of SUDs and CODs	Service Coordination and case management in the areas of SUDs and CODs	Service Coordination and case management in the areas of SUDs and CODs	Service Coordination and case management in the areas of SUDs and CODs	Service Coordination and case management in the areas of SUDs	Service Coordination and case management in the areas of SUDs

Counselling	Counselling, therapy, trauma informed care, and psycho-education with individuals, families, and groups in the areas of SUDs and CODs	Counselling, therapy, trauma informed care, and psycho-education with individuals, families and groups in the areas of SUDs and CODs	Counselling, therapy, trauma informed care, and psycho-education with individuals, families, and groups	psycho-educational counselling of individuals and groups	psycho-educational counselling of individuals and groups
Client, Family, and Community Education	Client, Family, and Community Education	Client, Family, and Community Education	Client, Family, and Community Education	Client, Family, and Community Education	Client, Family, and Community Education
Documentation	Documentation	Documentation	Documentation	Documentation	Documentation
Professional and Ethical Responsibilities	Professional and Ethical Responsibilities	Professional and Ethical Responsibilities	Professional and Ethical Responsibilities	Professional and Ethical Responsibilities	Professional and Ethical Responsibilities
Clinical supervisory responsibilities for all categories of SUD Counsellors	Clinical supervisory responsibilities for all categories of SUD Counsellors	Clinical supervisory responsibilities for categories Levels 1 and 2 as well as Substance Use Disorder Technicians.	Clinical supervisory responsibilities for all categories of SUD Counsellors		

The training programs

There was general agreement about the necessity of general requirements of training of drug counsellors. The main emphasize that training for drug counselling should aim to:

- (i) Fulfil generally accepted aims for counsellor training(Bor R. & Watts M., (2006))
- (ii) Meet the particular needs of counsellors who wish to work with clients who have addiction problems (McCrady B.S. & Epstein E.E., (1999) and Petersen T. & McBride A., (2002)).

The core competencies for any drug counselling stemmed from the Twelve Core Functions which has been agreed upon as mandatory for training any of those who are working in the team:

1. Screening, Intake, Orientation, Assessment, Treatment Planning , Counselling: (Individual, Group, and Significant Others, Case Management, Crisis Intervention ,Client Education ,Referral, Report and Record Keeping and Consultation with other professionals in regard to Client Treatment / Services

Also the acceptance of joining the process of supervision on the code of practice of counselling supervisor

Accreditation of Counselling /Psychotherapy Courses applicable to Addiction Therapy

The addictions counselling profession is aimed to be fully prepared to meet the requirements and consequences of assured statutory registration, whilst recognizing that universities and colleges have full responsibility for the teaching and supervision of their students during their training. In Egypt, it is planed that the coordinating council should take full responsibility of supervising trainers, training, and trainees

Although, the accredited courses are not generally uniform in their theoretical emphasis (for example: specialization in one counselling or psychotherapeutic approach or orientation, as in 'cognitive behavioural methods', 'psychodynamic theory', or '12-step philosophy'). Also they do not always cover the full range of addiction-related information and issues in detail. Moreover, the balance between generic counselling issues and specific addiction counselling issues is not always the same in all applications that meet the requirements of accreditation.

However, it remains that there are core issues, areas of knowledge and practice, and theories, that must be addressed in any course that seeks to train counsellors working with clients who have problems of addiction.

The core characteristics of courses to be accredited, in relation to four areas:

- Formal structure
- Student selection
- Academic and Professional content
- Examination and Assessment.

Establishment of scientific committee

5 experts in the drug addiction treatment field as well as the psychotherapy and counselling practice met bimonthly over 3 months as well as 5 experts of the internal team to discuss the training program, development of the scientific board for the foundation of the board “Training accreditation & certification board for addiction counsellors”.

The expert's board represented:

1. Two Professors of Psychiatry specialized in addiction psychiatry represents the biggest two Universities Hospitals in Egypt
2. Professor of Psychiatry and of the Egyptian association of group therapy and group processes
3. Professor of Clinical Psychology.
4. Ministry of Health & Population: department for licensing medical practice

Meetings of the experts which has been held for 4 months, discussed the following dimensions:

- Knowledge, skills and attitudes that all SUD treatment professionals should have in common
- Design of the training program,
- Modules for core curriculum
- The requirements for fulfilling the certification
- Requirements of work permission

Knowledge, skills and attitudes for SUD treatment professionals

The Field of chemical - dependency entails more than facilitative supporting skills and attitudes. Counsellors must respond to a number of complex legal and ethical considerations that have a direct impact on both delivery of counselling services and the attitude of the public (including those who are responsible for making referral towards those services).

The requirements for fulfilling the license is the fulfilment of theoretical knowledge as well as practical and supervised experience.

Ethical considerations in SUD counselling is of great responsibility .The principal rule is that the counsellor must act with full recognition of the importance of the rights of each patients , the ethics of the profession , and the relationship of moral standards and values , to the individual and/or culture

Task 1b: The study /field

Objective: to get oriented about the international/neighbour program

It has been suggested that the field study would include meeting of the licensing committee, introduction to system pros & cons, timeframe of training, examination & licensing requirement of applicants. Meeting certified addiction counsellor for sharing their experience in the field.

Lisbon Study visit

The study visit to Lisbon comes as part of the project activity for 3 working days to study the system for training & certifying addiction counsellors.

A team of 5 psychiatrists were selected for the study visit:

- 1- Prof. Noha Sabry (the coordinator), Head of research unit, GSMHA.
- 2- Dr. Reham Aly, Head of training department, GSMHA.
- 3- Dr. Nada Abuelmagd, Head of Addiction department, GSMHA.
- 4- Asst. Prof. Mahmoud Elhabiby, Addiction department, GSMHA.
- 5- Dr. Mohamed Mahmoud, External Affairs officer, GSMHA.

The visit report:

- At SICAD's – February 3rd, 2016

On February 3rd, the team arrived in SICAD office at 10:30 am and met the visit coordinators who gave a presentation of the Technical Psychosocial School of Lisbon till 1:00 pm.

- Technical Psychosocial School of Lisbon- February 3rd, 2016

On February 3rd, the team arrived at the Technical Psychosocial School of Lisbon at 3:00 pm, met Mrs. Irene Almeida and attended a class for the primary level students till 5:30 pm. This is a specialized high school present in Lisbon which intend to graduate psychosocial technicians (associate general counsellors) who can work in all the fields of counselling. Helping substance abusers counsellors among other fields. The School consisted of three years coverings basic psychology and counselling skills as well as team building and different creative art activities that can be used in motivation and counselling. One of the attended classes was discussing how to make projects reflecting cases of concerns to the counsellors. One of themes was about addiction and the students make projects reflecting the issue. The third year students starting their practical practice under supervision of their mentors

- Technical Psychosocial School of Lisbon_- February 4th, 2016

On February 3rd, the team arrived at the Technical Psychosocial School of Lisbon at 10:30 am, met Mrs. Irene Almeida and her team and attended different classes for different levels till 1:30 pm, which shows different methods for teaching counselling. Including how to produce motivational video film, using drama techniques, Music techniques and hand crafts. Also they showed team building activities.

- SICAD's Documentation Centre - February 5th, 2016

On February 5th, the group had a visit to SICAD's Documentation Centre at 10 am, met the visit coordinators again to discuss the results of the visit and left at 1 pm.

- Conclusion:
- The visit showed an established model of graduating high school psychosocial technician in the field in Lisbon

- The model represent the flexibility of designing whatever model to fulfill the aim of the study
- Graduates are starting their career in young age, trained on different general counselling skills that allow them to work and providing help in addiction counselling
- The model is unique and represent only one school that might qualify graduate to university education in the field of counselling
- Developing this school required some changes in legislation in the education field. As it is followed the ministry of education

Limitation of the Study Visit

- 1- The difficulty of direct application of same model. Since our hypothesized program is aimed to belong to the health field .The Candidates are considered as health provider
- 2- The school was not specific one for graduating counselling providers for SUD, however one of the topics introduced to it directed to SUD clients
- 3- The lack of specific program curriculum that covers all the requirements SUD counsellors

Task 2: Development of the Curriculum and Training Modules:

The internal team headed by the project coordinator met to put the headline of the training curriculum after collecting the references to be used as a background and put the first draft including seven Modules. Then discussion held with the experts team to discuss the intended learning outcome, needed hours, the required theoretical and practical parts and required supervision and the ways of evaluation

Stage of First Draft production:

- 4- At the meeting of 11 February 2016, the following references were used as background in the designing of the curriculum:
 1. Principles of addiction medicine Fifth edition – American society of addiction medicine(2014)
 2. Textbook of Addiction Treatment – International Perspectives (2015)
 3. Building motivational interviewing skills a practitioner workbook (David B. Rosengren)
 4. Physiology and pharmacology for addiction professionals – Participant manual, Training curriculum series 1& 2.
 5. Issues & Ethics in the helping professions – sixth edition (Gerald Corey, Marianne Schneider Corey and Patrick Collanan).
 6. Counselling the chemically dependent theory and practice (Rickey L. George)
2. The first draft was introduced to the work group, followed by two group discussions were made before releasing the final draft to be revised by the experts committee.

Developing a training Program curriculum of counsellors in substance abuse

1. Modules of Core Curriculum of Counsellors Program in Substance Abuse:

Module One: Substance Use Background

Module Two: Recovery Process

Module Three: Basic Counselling Techniques

Module Four: Counselling in Substance Use Disorders

Module Five: Family Counselling

Module Six: Ethical and Legal guides in Counselling

Module Seven: Special Population and comorbidities

These Modules are discussed with the experts' boards guided by the goals of each module, the intended learning outcomes have been followed by classifying the needed hours to each module

2. Training Goals & intended learning outcomes of each Modules

Module	Goals	Intended Learning outcome
Module 1: Introduction to psychoactive substance Use	<ol style="list-style-type: none"> 1. Provide an overview of addiction as brain disease 2. Introduce main categories of psychoactive substances 3. Describe short and long-term physiological and psychological effects of psychoactive substances 4. Highlighting drug use problem in Egypt 5. Provide a comprehensive overview of effects of drug use on families 	<ol style="list-style-type: none"> 1. Discuss why addiction is brain disease 2. Know the main categories of psychoactive substances and several substances within each 3. Provide basic description of how psychoactive substances create their effect in the brain 4. Know the extent of the problem of substance use in Egypt and the cultural aspect of the problem 5. Discuss the individual, family and consequences of drug use
Module 2: Recovery Process	<ol style="list-style-type: none"> 1. Provide overview of the concept of recovery. 2. Introduce the overall goal and frame work for understanding treatment substance use disorders (SUDs) 3. Understand how to put successful therapy plan 4. Understand the concept of continuum of care 5. Introduction of the pharmacotherapy of SUDs 6. Know the role of psychotherapy and counselling 	<ol style="list-style-type: none"> 1. Define recovery and know the components of recovery process 2. To identify the principles of effective treatment for substance abuse 3. To get know how to put successful therapy plan and how to be part of the applicant to the plan 4. To know components of treatment 5. To provide a general description of an effective continuum of care for SUDs 6. To know the different roles of therapy and proper time including role of pharmacotherapy and psychotherapy
Module 3: <u>Basic Counselling Skills:</u>	<ol style="list-style-type: none"> 1. Understand the concept of counselling and its general rules of counselling 2. Know the basic counselling skills 	<ol style="list-style-type: none"> 1. Have an overview the action – counselling model 2. Know and be able to practice specific counselling techniques and skills

Module 4 <u>Counselling in Substance Use:</u>	<ol style="list-style-type: none"> 1. Understand the role of Counselling in substance abuse 2. Know the behavioural techniques in managing substance use, including motivation to recovery 3. Counselling in the field of Relapse Prevention 4. Training on Counselling Model (Skills Training, Craving, dealing with stress, emotion regulation, and how to manage challenges 5. Know the value of group approaches in counselling group approaches 6. Understand therapeutic factors of group counselling 7. Use the specific techniques of group setting 	<ol style="list-style-type: none"> 1. Be able to practice counselling skills effectively in SUDs 2. Master motivational interviewing skills 3. Apply Counselling skills with Craving, stress, emotion regulation, and how to manage challenges 4. Be able to lead counselling group for SUD clients and use different group counselling techniques 5. Understand the difference between self-help groups (or meetings) and the group -therapy
Module 5: <u>Family Counselling</u>	<ul style="list-style-type: none"> • Understand the family role in enhancing recovery • Have an idea about the family dynamics • Understand different family interventions 	<ol style="list-style-type: none"> 1. Be able to involve the family , and support them in order to enhance outcome of SUD clients 2. Be able to use different family interventions in family counselling 3. Be able to organize and practice family education, family support groups and family counselling
Module 6: <u>Ethical and Legal guides in Counselling</u>	<ol style="list-style-type: none"> 1. Understand the core ethical principles of counselling and responsibilities of counsellor 2. Identify about the Egyptian law regarding dealing with Psychiatric and SUDs Patients in Egypt 3. Know the ethics of dealing with families 4. Highlight the special ethical considerations regarding special groups 5. Know the necessity of continuous upgrading of skills (continuous education) as requirement for ethical practice 	<ol style="list-style-type: none"> 1. Get to know the code of ethics of counselling 2. Manage to practice addiction counselling guided with ethics 3. Be able to choose the right decision when faced with any ethical dilemma 4. Be able to deal with ethical issues while working with SUDs families 5. Acquire the ethical considerations needed for working with special groups 6. Consider continuous learning and renewal of skills and it's relation to the ethical practice
Module 7: <u>Special Population and comorbidities</u>	<ol style="list-style-type: none"> 1. Understand what is meant by comorbidity 2. Know the different types of dual diagnosis patients 3. Understand the concept of recovery and relapse in dual diagnosis patients 4. Know the specific counselling skills with medically ill 5. Understand gender sensitive issues when working with 	<ol style="list-style-type: none"> a. Be able to know the limitations in cases of dual diagnosis b. Understand their role in the therapeutic interventions in cases of dual diagnosis e. Be able to include the pharmacotherapy compliance issues as well as the importance of

	<p>women</p> <ol style="list-style-type: none"> 6. Know how to select appropriate counselling skills with elderly substance abuse 7. Develop the counselling skills of specific situations as with those working in special occupations (example: impaired physicians – car drivers- security & safety jobs) 8. Know how to do counselling with marginalized population 	<p>recovery from mental illness in dual diagnosis patients</p> <ol style="list-style-type: none"> e- Be able to adopt some gender sensitive specific skills e- Know how to deal with cases of elderly with SUDs f- Acquire the specific skills needed to help SUDs clients working in special occupations 7. Know how to provide counselling with marginalized population
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3. Core curriculum of the proposed training program for addiction counsellors

Module	Theoretical/Needed hours	Practical/clinical Needed hours	Total hours of training	Assessment / Examination
<u>Module 1:</u> <u>Substance Use</u> <u>Background:</u>	15 h <ol style="list-style-type: none"> 1. The Addiction Process (Theories of Addiction) 2. Classification of psychoactive substances 3. Consequences of substance abuse 4. Screening and assessment of Substance Use Disorder 5. Epidemiology if substances abuse in Egypt 6. Tobacco as addiction and gateway to psychoactive substance abuse 7. Other forms of addictive behaviour 8. Theory of co-dependency 	30h <ol style="list-style-type: none"> 1. Checklist of substance use 2. Assessment, including severity assessment 3. Small group discussions: Case Studies 4. Focus groups about misconception of substance use disorders 	45h	-Attendance -OSCE -Written (In Arabic) -Clinical MCQ -Case vignettes -Short questions

<u>Module 2:</u> <u>Recovery Process:</u> The components of the recovery process Psych education of the components of the treatment plan Successful Treatment Plan Role of Pharmacotherapy in Treatment Plan Role of Psychotherapy in Treatment Plan Documentation (in all stages)	15 Hrs. 1. Very general knowledge (not to go into details for not having role diffusion) 2. Side effects and its importance 3. The importance of medication 4. The risk of medications 5. How to participate in treatment plans as one of a multi-disciplinary team 6. The problem of relapse	15 Hrs. -Case vignette Small group exercises what is recovery -Providing support systems -Twelve steps -Other support groups -Spirituality in recovery -How to evaluate the recovery process	30 Hrs.	-Attendance (Shadowing) -OSCE -Clinical -MCQ (e.g. for pharmacotherapy) -Case vignettes -Short questions
<u>Module 3:</u> <u>Basic Counselling Skills:</u>	30 Hrs. What are basic counselling skills? Approaches to counselling and helping relationship & process Specific counselling skills: Understanding the internal frame of reference Showing attention and interest Paraphrasing and reflecting feelings Asking questions Monitoring Offering challenges and feedback	60 Hrs. How to prepare yourself for becoming counsellor Interviewing skills Case presentation Role playing Practicing the individual counselling skills Live cases (shadowing, then case interviewing)	90Hrs	Attendance OSCE Written (In Arabic) Clinical

	Self-disclosing Managing resistance and making referrals Face-lifting problem solving Coaching, demonstrating and rehearsing training clients in relaxation Improving clients self-talk Improving clients rules negotiating homework Conducting middle sessions Terminating helping Burn out, and how to deal with it Documentation			MCQ Case vignettes Short questions
Module 4: <u>Counselling in Substance Use</u>	40 Hrs. <ol style="list-style-type: none"> 1. Role of Counselling in substance abuse (Counselling Model: Skills Training, Craving, R, dealing with stress, emotion regulation, how to manage challenges) 2. Specific Counselling techniques: Attending Empathy Confrontation Self-disclosure Cognitive restructuring Behaviour contracts Social learning Assertion training Relaxation training 3. Behavioural Techniques in managing substance use, including motivation to recovery and Aversion therapy 4. Counselling in the field of Relapse Prevention 	160 Hrs. 50 group sessions (2 hours each) and 60 individual sessions	200Hrs	-Attendance (shadowing) -OSCE -Clinical -MCQ (e.g. for pharmacotherapy) -Case vignettes -Short questions

	<ul style="list-style-type: none"> 5. Social and problem solving skills 6. Enhancing self esteem 7. Crisis intervention 8. Basics of Self-help groups (example:12 Steps Program) 9. Group Approaches to counselling 10. Therapeutic Elements in Group Counselling: Leadership Styles in Group Counselling Using specific Techniques in group setting Self – Disclosure immediacy Confrontation Cognitive Restructuring Role Playing Phases and Stages of Group process 11. Documentation 			
<u>Module 5:</u> <u>Family Counselling</u>	10 Hours <ul style="list-style-type: none"> a. Importance of Family Interventions in Substance Abuse Disorder b. Family education c. Skills training for families: <ul style="list-style-type: none"> 1. Dealing with high risk situations including craving, suspicion 2. Emotional expressions in the family 3. Dealing with guilt and shame 4. Relapse prevention 5. Dealing with relapse 4. Documentation 	30 Hours	40h	

<u>Module 6:</u> <u>Ethical and Legal guides in Counselling</u>	25h 1. Ethics of Counselling 2. Laws regarding dealing with Psychiatric Patients in Egypt 3. Ethical considerations regarding dealing with substance abuse in Egypt 4. Ethical considerations regarding dealing with families 5. Ethical considerations regarding special groups	1. Application will be done through cases 2. How to make therapy contract 3. How to take consent 4. When to break confidentiality 5. Discussion and supervision of the counselled cases concerning ethical dilemmas	25h	-Case vignettes -Problem solving -Short questions
<u>Module 7:</u> <u>Special Population and comorbidities</u>	30h a. Concept of co-morbidity and dual diagnosis b. Considerations regarding counselling in medically ill (example: HBV, HCV, HIV, disabled patients) c. Counselling for Women d. Counselling for Older adults e. Counselling for special occupations (example: impaired physicians – car drivers- security & safety jobs) f. Counselling for Marginalized Populations (example: homeless, prisoners)	60h - Skills of screening & referrals - Working within team - Shadowing senior staff - Role play -Individual cases with special population	90h	

4. Components of Examination and Assessment

- a. Clear specification in Course Guide of requirements for satisfactory completion of the course.
- b. Systematic assessment of students' fulfilment of learning objectives on the course, including by professional logs and case study.
- c. Systematic provision of constructive feedback on student workplace performance by placement providers
- d. Passing the written examination and case vignettes by at least 60% of the grade

Practical steps for development the certification of the drug counsellors

After fulfilment of the report, a memoir attached with summary of the curriculum in Arabic will be raised with an attachment report to the Minister of Health with aim of taking the permission for:

- a. The development of Training Program in drug counselling that is totally and exclusively run and supervised by GSMHAT
- b. The fulfilment of the training program and passing the exams will be prerequisite for having certification in the drug counselling
- c. Supporting the certified counsellors as being a step towards ethical and recognized practice
- d. Take the approval from minister of health to consider the certification of the counsellors a requirement for the accreditation of the addiction treatment centres.

References

- Bor R. & Watts M., (2006), *The Trainee Handbook: a Guide for Counselling and Psychotherapy Trainees*. London, Sage
- Kulewicz S.F. (1996) *The Twelve Core Functions of a Counselor*, Marlborough: Counselor Publications
- McCrady B.S. & Epstein E.E.(1999) *Addictions: A Comprehensive Guidebook*. London, Oxford University Press
- Petersen T. & McBride A. (Eds.) (2002), *working with Substance Misusers: a guide to theory and practice*. London, Routledge