

Addictions training curriculum

An evidenced-based curriculum for
delivering addictions counselling training

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Updates were made in August 2026 to align content relating to risk assessment and management with contemporary research.

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Rationale

BACP has a commitment to meet the varied needs of its members. In response to the need for an updated evidence base to underpin and inform counsellor competency development in addictions counselling, BACP commissioned the *Addictions Competence Framework* (2024), based on a comprehensive review of relevant research and guidance literature and expert consultancy.

The BACP *Addictions Competence Framework* is designed to support qualified counsellors and/or psychotherapists to understand and develop specialist knowledge, skills and abilities to work with adults with addictions. The competences identified in the *Addictions Competence Framework* are in addition to the competences identified in column A of the *SCoPEd framework* (2022), which identifies the minimum core training, practice and competence requirements for BACP registered counsellors and/or psychotherapists working with adults. Throughout this curriculum the terms 'counsellor' and 'counselling' are used to cover the practice of counsellors and/or psychotherapists offering counselling and/or psychotherapy services.

This curriculum is underpinned by the *Addictions Competence Framework*. It is recommended that the curriculum is used alongside the competence framework and user guide:

<https://www.bacp.co.uk/events-and-resources/ethics-and-standards/competences-and-curricula/addictions-curriculum/>

In addition, trainers and course participants should refer to:

- BACP's *Ethical Framework for the Counselling Professions* (2018): <https://www.bacp.co.uk/events-and-resources/ethics-and-standards/ethical-framework-for-the-counselling-professions/>
- BACP *Good Practice in Action (GPiA)* resources to support members in implementing the Ethical Framework in their practice: <https://www.bacp.co.uk/gpia>
- *Scope of Practice and Education (SCoPEd) framework* (2022): <https://www.bacp.co.uk/about-us/advancing-the-profession/scoped/scoped-framework/>

Aim of the curriculum

This curriculum is designed for training providers who wish to deliver a comprehensive, evidence-based addictions counselling training programme for qualified counselling and psychotherapy practitioners, or trainee counselling and psychotherapy practitioners considering applying for an addictions-focused placement, to prepare them to work safely and ethically with adults seeking help with addiction.

This curriculum is set out in two parts. The first part explains its uses, provides an overview of the four primary subject areas, and explains course delivery, supervision and assessment. It also covers entry requirements for prospective participants. The second part covers the four subject areas in more detail, including learning outcomes and course content for each area.

Intended uses for the curriculum

The training curriculum is designed to be flexible to meet the varied needs of training providers situated across the four nations of the United Kingdom. It may be delivered by appropriately qualified staff in Higher Education (HE), Further Education (FE) and private training institutions.

Different trainings have differing qualification, assessment and validation requirements. Training providers may adapt the learning outcomes and duration of the programme to meet their specific qualification requirements.

Course trainers should refer to the Good Practice section of BACP's *Ethical Framework for the Counselling Professions* (2018), in particular Good Practice points 74–80 (Training and Education).

The *Addictions training curriculum* is designed to attend to the range of competences set out in BACP's *Addictions competence framework* (2024). However, it is not an exact copy and so it is strongly advised that trainers refer to the addictions competences before developing teaching resources on each subject area.

Curriculum overview

The curriculum is structured over the following subject areas:

Subject area 1. Knowledge and understanding of addiction

Subject area 2. Ethical and professional practice in addictions counselling

Subject area 3. Establishing and maintaining the therapeutic relationship in addictions counselling

Subject area 4. Facilitating the addictions counselling process

Each of the four subject areas has defined learning outcomes mapped to the BACP *Addictions competence framework*.

Subject area 1 maps to the *Knowledge competences* in the *Addictions competence framework*, which includes knowledge of addictions, co-occurring issues and therapeutic approaches to working with adults affected by addiction.

Subject area 2 maps to the *Professional competences*. These are concerned with the counsellor or psychotherapist's ability to apply professional, legal and ethical guidelines to practice.

Subject area 3 maps to the *Engagement competences*, and focuses on the skills required to overcome potential client ambivalence (e.g. mixed feelings and/or contradictory ideas about their addiction); fostering and maintaining a good therapeutic alliance; and the counsellor or psychotherapist's ability to grasp clients' perspectives and experiences without judgment.

Subject area 4 maps to the *Therapeutic competences*. This domain of competence refers to the counsellor's ability to support clients to make desired changes. They include working with clients seeking help to appropriately support a loved one who is living with an addiction.

It should be noted that the *Addictions Competence Framework* includes reference to two further domains of competence not explicitly covered in this curriculum. These are the **Foundational competences**, which represent counsellor attitudes and values that should underpin all aspects of addictions counselling, and **Meta-competences**, which reflect higher order skills needed to implement therapy in a coherent and informed manner, using good clinical judgment and sound ethical decision-making. For more information on foundational and meta-competences please see pages 15 and 24 in the *Addictions Competence framework User Guide*.

While this curriculum focuses on the primary subject areas for counselling adults living with addiction, tutors should ensure that the BACP Addictions competence framework foundational and meta-competences are covered appropriately by the training programme.

Curriculum delivery

- It is expected that the course will include a wide range of teaching styles and as much experiential work as possible
- The teaching team should hold sufficient knowledge and experience to cover all elements of the course. Trainers should be qualified, experienced counsellors. Courses may bring in specific expertise to teach different elements of the *Addictions training curriculum* where there are knowledge gaps within the teaching team. Courses are responsible for assessing participants' competence throughout the course and before beginning addictions' practice
- The course can be delivered in person and/or via synchronous online delivery. Training modalities should duplicate the modes of delivering addictions counselling that course participants will be offering in their practice. Trainers should be experienced and competent with the different modes of delivery
- The delivery of this training curriculum should be underpinned by adult learning theories, including experiential and reflective learning approaches such as Wenger's (2018) social theory of learning; Gibbs' (1988) Reflective Cycle; or Korthagen & Vasalos' (2010) Core Reflection Model
- In the interest of ethical experiential skills practice and reflective training, it is important that sessions are delivered in a manner that allows sufficient time for participants to process newly acquired knowledge, and to practice skills in a way that complements learning
- The Core subject areas contained within the *Addictions training curriculum* are not intended to sit as separate units. Subject areas do not need to be delivered in a linear or sequential format. Trainers should use their experience and judgment in using this curriculum to design a programme that is suitable to the learning needs of their participants, and that is consistent with an approach(es) or model(s) of addiction counselling taught on the course
- Similarly, the listed contents for each subject area are not intended to become a checklist of competences for course participants to achieve, as this could potentially undermine the relational, experiential and reflective aspects of learning
- Many of the subject areas interlink, with some underpinning all elements of the course. For instance, **Foundational competence 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 own and emerging approaches to working with addictions, and **Meta competence 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, link with content in **Subject area 3:** Establishing and maintaining the counsellor-client relationship in addictions counselling, and **Subject area 4:** Facilitating the addictions counselling process.

This curriculum is transtheoretical. It can be applied to different taught modalities and theories, and can support course participants to develop their addictions' practice in a way that aligns with their existing therapeutic approach.

- Although there are several subject areas across the whole of this curriculum, one subject area does not necessarily equate to one day of course delivery. It is suggested that an average learning session lasts for one day of six to seven hours with appropriate breaks. This session length can also be increased/decreased at the training provider's discretion to meet the requirements of their institution and/or awarding body
- Courses must ensure a minimum of 80% participant attendance, and 100% successful completion of the subject areas and course assessments. Any missed sessions or assignments must be made up by the participant before they can complete the course

- All participants should be encouraged to develop their capacity for reflective practice, with use of reflective journals or portfolios as deemed helpful by course staff. Assessment should include elements of personal reflection in a way that promotes participants' personal and professional growth
- With appropriate contracting, skills practice sessions should include participant counsellor-client dyad role plays supervised by the trainer. Participant triads with a counsellor-client dyad and participant observer can help enhance participant observation and feedback skills.
- It may be useful for participants to audio or video record some skills practice sessions for whole-class review. This can enable critical reflection on their skills, and further development of self-evaluation and awareness
- Participants should be provided with an appropriate learning environment. Consideration should be paid to physical classroom size and furnishings, functionality of online and hybrid teaching platforms and internet access, accessibility of operable recording equipment, availability of confidential spaces for counselling practice, suitability of GDPR-compliant secure online portfolio storage, and effective communications around timetabling. Both the resources needed for optimal modern didactic and experiential learning, and the staff skills needed to make best use of available learning media should be regularly reviewed
- All participants should be encouraged to be active researchers. Assignments might include working together to present a topic to the wider group; or producing well-documented and appropriately referenced theory papers or case studies. Assignments should build participant self-confidence as research-active practitioners. Participants should also be encouraged to engage with recent and important addictions research literature to support their evidence-based practice
- A sample participant feedback questionnaire around their experience of training is included as an appendix to this curriculum on page 22.

An example session

A typical session might reflect the following format:

09.30–10.00

Group session to bring the group together either for the first time or since the last session

10.00–12.30

Didactic teaching of specific subject area(s) content

12.30–13.30

Lunch

13.30–14.30

Group experiential and reflective work (including discussion on the taught material, participants' personal responses to it, and how it relates to ethical and professional practice e.g. BACP's *Ethical Framework for the Counselling Professions*)

14.30–16.00

Addictions counselling skills practice

16.00–17.30

Group supervision/reflective practice session

Facilitators/trainers should:

- be qualified counsellors
- be qualified and/or experienced addictions counsellors
- be experienced trainers and assessors with experience of delivering experiential counselling practitioner training
- be current registered members of BACP or an equivalent PSA accredited counselling/psychotherapy membership body
- comply with BACP's *Ethical Framework*, or an equivalent ethical framework/code of practice
- be covered by professional indemnity insurance for their training and supervision practice where required
- refer to the *BACP Addictions competence framework* and *User guide* before embarking on each subject area.

Practice hours requirements during training

This curriculum does not stipulate the number of addictions practice hours needed for assessment of competence in addictions counselling. It is the course's responsibility to set the number of addictions counselling practice hours they require to determine competence. As a guide, a suggested minimum is 25 hours of specific addictions counselling practice.

Supervision

Participants' clinical practice should be supervised by qualified supervisors whose competence is aligned with the BACP *Supervision competence framework* (2021). Where possible, the supervisor should be experienced in providing counselling to adults affected by addiction. Courses are responsible for ensuring that supervisors have the required training, knowledge, skills and experience to effectively supervise counsellors working with people affected by addictions and to support their professional development.

To support participants' addiction counselling skills development, they should be required to receive a minimum of one hour per month of addictions-focused supervision in addition to, and separate from, their usual counselling supervision during the period in which they are training. The amount of supervision may need to be increased if the course participant has a high client load.

There is also an expectation that BACP members working as addictions counsellors will make appropriate use of supervision, such as meeting or exceeding the requisite minimum number of hours of counselling supervision, and ensuring supervision is carried out under clear working agreements that are periodically reviewed. The competence and quality of care provided to clients should be regularly reviewed in supervision. Reflective practice should be supported through self-questioning, experimenting with ideas, and goal setting to improve performance.

Assessment

- Formative assessments are encouraged throughout the course to monitor competence and provide ongoing feedback that can be used to enhance learning
- Examples of formative assessment include feedback on observed live or recorded skills practice; self and peer evaluation and assessment; individual or group presentations; reflective writing/journaling; feedback on development of ethical and professional practice; role played examples of the competences in action; discussion of intention and decision-making in clinical practice; case presentations; competence rating forms or review of client outcomes. Course staff are responsible for devising effective formative assessments in line with their teaching methods and relevant learning outcomes
- Reflective journals may also usefully enable course participants to reflect on their own process throughout the course
- Summative assessments are essential to evaluate course participants' competence against the learning outcomes. These assessments can be adapted to suit the requirements of the training provider and/or awarding body, but in all cases, they must reflect and adequately evidence the learning outcomes
- Examples of summative assessments include critical analysis essays; case studies; skills practice assessment; individual and group presentations; practice portfolios; written examination of knowledge; evaluation of ethical decision-making in relation to addictions counselling, personal learning and development statements
- Course trainers may find that some of the learning outcomes are best assessed via an ongoing formative assessment procedure, and so a mix of summative and formative assessments are acceptable. The examples of assessments given above are not exhaustive, and there may be other ways in which course participants' work can be assessed.

Course entry requirements

It is recommended that applicants should:

- be a qualified counselling/psychotherapy practitioner with a minimum of level 4 diploma [Regulated Qualifications Framework (RQF) England, Wales and Northern Ireland] or a level 7 [The Scottish Credit and Qualifications Framework (SCQF) Scotland] or equivalent, which included a minimum of 100 hours supervised counselling/psychotherapy practice in line with recognised practitioner training mapped to SCoPEd column A
- be a registered member of BACP or or equivalent professional body whose members must adhere to an ethical framework or code of practice
- have appropriate supervision arrangements in place
- hold in-date professional indemnity insurance throughout training
- evidence the ability to manage risk through previous safeguarding and risk-management training.

In addition, it is recommended that the training provider requests references to confirm the applicant's suitability. The applicant's own supervisor and/or line manager (where applicable) may be ideally placed to provide such a reference. Referees should have known the applicant for a minimum of two years in a professional capacity and must not be a spouse, partner or relative.

References:

BACP (2018) *Ethical framework for the counselling professions*. Available from <https://www.bacp.co.uk/events-and-resources/ethics-and-standards/ethical-framework-for-the-counselling-professions/>

BACP (2021) *Counselling supervision training curriculum*. Available from <https://www.bacp.co.uk/media/12959/bacp-supervision-curriculum-sep21.pdf>

BACP (2021) Supervision competence framework. Available at <https://www.bacp.co.uk/events-and-resources/ethics-andstandards/competences-and-curricula/supervisioncurriculum/>

Gibbs, G. (1988) *Learning by doing: A guide to teaching and learning methods*. Oxford Further Education Unit

Korthagen, F.A.J. & Vasalos, A. (2010) *Going to the core: Deepening reflection by connecting the person to the profession*. In Lyons, N. (Ed). *Handbook of Reflection and Reflective Inquiry: Mapping a Way of Knowing for Professional Reflective Inquiry* (pp.529-552). Springer

SCoPEd Oversight Committee (2022) *SCoPEd framework: A shared framework for the scope of practice and education for counselling and psychotherapy with adults*. Available from <https://www.bacp.co.uk/about-us/advancing-the-profession/scoped/scoped-framework/>

Wenger, E. (2018) A social theory of learning. In Illeris, K. (Ed). *Contemporary Theories of Learning* (2nd Ed). Routledge

Addictions training curriculum

Subject area 1. Knowledge and understanding of addiction

Subject area 2. Ethical and professional practice in addictions counselling

Subject area 3. Establishing and maintaining the therapeutic relationship in addictions counselling

Subject area 4. Facilitating the addictions counselling process



Subject area 1: Knowledge and understanding of addiction

Introduction

This subject area aims to develop course participants' knowledge and understanding of the nature of addiction. Consideration should be paid to course participants' theoretical approaches to addictions counselling, alongside developing understanding of their application in practice. The team that developed the *Addictions competence framework* agreed that a report published by the European Monitoring Centre for Drugs and Drug Addiction (West, 2013) provided a helpful synthesis of numerous definitions of addiction, which share the following commonality: a repeated powerful motivation to engage in a particular behaviour, acquired through enacting the behaviour, and in a way that invokes potential risk of significant harm to self and/or others.

West (2013) also suggests that addiction theories form an overarching structure that can inform assessment, prevention, and treatment of addictive behaviours. The Expert Reference Group for the *Addictions competence framework* added that core experiences of addiction include loss of control; narrowing of one's behavioural repertoire at the expense of valued roles and activities; detriments to social and relational functioning; health problems, and/or inability to adequately meet responsibilities. The *Addictions competence framework* does not distinguish between abuse and dependence. Related terms include dependency, problematic use, at-risk, hidden dependencies, and compulsion.

Training should also cover knowledge of addictions services and treatment options; and challenges in access to counselling for some addictions. Understanding impacts of mental and physical health and social issues co-occurring with addiction should be covered.

Learning outcomes

Upon successful completion of Subject area 1, participants will be able to:

- demonstrate knowledge and understanding of multiple influences on the cause, development and maintenance of addictions
- demonstrate knowledge and understanding of a range of models, approaches and evidence-based interventions used in addictions counselling
- demonstrate the ability to work within a coherent and consistent theoretical framework for addictions counselling
- clearly articulate own theoretical approach to addictions counselling
- critically evaluate the influence of their own therapeutic orientation on addictions counselling.

Content

- Addiction definitions, types of addictions, changing patterns, substances and the biological, psychological, social and economic impacts and influences on addictions
- The multiple influences on the cause and development of addictions
- At least one core therapeutic model and how their existing therapeutic modality informs their developing theoretical approach to addictions
- Common factors across therapeutic disciplines which contribute to effective therapeutic outcomes. These include counsellor factors (such as relational skills); client factors (such as readiness to use therapy as a social learning tool); therapeutic alliance (as a co-constructed working relationship); and extratherapeutic factors (such as quality of social support).
- Wide ranging individual, contextual and societal factors that contribute to the development and maintenance of addictions
- How intersecting experiences of inequality, discrimination and stigma may impact clients living with addiction
- Models, approaches and evidence-based interventions for addictions. Examples might include cognitive behavioural therapy (CBT), motivational interviewing (MI), relapse prevention third-wave therapies like dialectical behavioural therapy (DBT) and acceptance and commitment therapy (ACT) Relevant sources of information about evidence-based practice, recovery and harm reduction. This may include but not be limited to guidance from sources such as National Institute for Health and Care Excellence (NICE) and UK Government guidance on alcohol treatments and drug misuse and dependence
- A range of available addictions services and treatments. These may include outpatient and inpatient services, residential therapeutic communities, prisons, detention centres, mental health services, community-based services, mutual aid support, addictions-specific support services, rehabilitation and detox centres, and community-based drop-in sessions
- The prevalence and relationship between co-occurring issues, whether these are mental or physical health concerns or additional addictive behaviours, and the challenges and inequalities faced by people living with an addiction. For example, *The Public Health England (PHE) gambling related harms evidence review (2023)* showed that there is evidence of a clear association between increased weekly alcohol consumption and harmful gambling
- Key principles underpinning trauma-informed practice
- How to assess and understand clients' complex life histories preceding and involving substance use and addiction
- The influence of participants' therapeutic orientation, philosophy and lived experiences on addiction counselling approach
- Understanding the role of addiction counsellors in a range of contexts and settings
- How to utilise contemporary research and developments in the field to inform and enhance the ongoing development of addiction counselling.

For more information about the addictions competences related to Subject area 1, please refer to the following sections of BACP's Addictions competence framework:

Foundational competences 1.1 - 1.6, 1.8, 1.10

Knowledge competences 2.1.1 - 2.1.6, 2.2.1 - 2.2.5, 2.5.1 - 2.5.6

Professional competences 3.1.2, 3.2.1, 3.3.4

Engagement and assessment competences 4.1.1, 4.5.1

Therapeutic competences 5.1.1, 5.3.2

Meta-competences 6.1, 6.2

Subject area 2: Ethical and professional practice in addictions counselling

Introduction

This subject area aims to ensure course participants have a sound working knowledge of the ethical, legal and professional frameworks that are relevant to addictions counselling. Competent practice is underpinned by knowledge of, and ability to apply, professional, legal and ethical guidelines to practice. Counsellors will need to understand and be able to act in accordance with relevant legislation and policies that apply to settings and locations where addictions counselling takes place. Training should appraise participants of how relevant laws and policies impact the lives of clients living with addiction in the country in which they are located.

Learning outcomes

Upon successful completion of Subject area 2, participants will be able to demonstrate:

- knowledge of, and ability to apply professional, legal and ethical guidelines to practice
- the ability to identify and work through ethical, professional and legal dilemmas, challenges and risks
- the ability to critically reflect on their own responses to the ethical, professional and legal roles and responsibilities
- the ability to establish and maintain appropriate personal and professional boundaries in addictions counselling relationships
- knowledge of and ability to work with issues of equality, diversity and inclusion that shape client experiences.

Content

- Relevant ethical, legal and professional frameworks and principles that apply to addictions counselling
- Clinical governance, local and national policy, agency/organisational policy/procedures, safeguarding procedures etc.
- Relevant legislation and policies that apply to settings and locations where addictions counselling takes place. Understanding how laws, policies and reforms impact the lives of clients living with addiction in the country in which they are located. Recent examples include the introduction of minimum price per unit of alcohol in Scotland in 2018 and Wales in 2020; and UK gambling law reform introduced in 2023
- Ethical challenges and conflicts in addictions counselling and maintaining ethical and professional boundaries. These might include:
 - challenges to confidentiality, such as third-party information requests and managing disclosures
 - management of boundaries, confidentiality and potential dual relationships that may occur in counsellor-client relationships, as in mutual aid and recovery community relationships
- The impact of disadvantage and discrimination (including intersecting and multiple disadvantages), social and cultural differences, lifestyle, beliefs and attitudes to addiction
- How a client's world view may have been exploring and understanding how a client's world view may have been shaped by experiences of inequality. Working to ensure anti-oppressive and anti-discriminatory practice

- How to use supervision, self-examination and reflection to:
 - explore their own experiences and values in relations to addiction
 - reflect on cultural attitudes and beliefs about addiction
 - offer an open and honest account of their work
 - work through ethical and professional challenges arising in practice
 - extend knowledge, skills and competence
 - work within their competence, while keeping skills and knowledge up-to-date.

For more information about the competences related to Subject area 2, please refer to the following sections of BACP's *Addictions competence framework*:

Foundational competences 1.4 - 1.6, 1.10 - 1.12

Professional competences 3.1.1 - 3.1.5, 3.2.1 - 3.2.4, 3.3.1 - 3.3.4

Engagement and assessment competences 4.11

Therapeutic competences 5.1.1, 5.1.6, 5.2.2

Meta-competences 6.4, 6.6

Subject area 3: Establishing and maintaining the therapeutic relationship in addictions counselling

Introduction

This subject area is concerned with counsellors' ability to build working relationships with clients. It also introduces course participants to the importance of using an addiction-specific counselling contract, and coherent assessment processes of a client's abilities to engage with addictions counselling. Determining the suitability of counselling to meet a client's needs is also covered.

Alliance-building factors, such as the client's experience of the counsellor or psychotherapist as respectful, warm, friendly, non-judgmental and affirming, are important considerations in early communications.

Assessment is a core activity for all counsellors and psychotherapists working with people living with an addiction, to gain an understanding of the client's difficulties and how these may have developed over time. The training course should provide opportunity for participants to become familiar with administering, using, scoring, interpreting, explaining, and recording generic and specialist outcome measures for tracking progress in therapeutic work with adults living with addictions.

Learning outcomes

By the end of this subject area participants will be able to:

- demonstrate the ability to undertake appropriate addictions-informed assessment
- demonstrate knowledge of the factors associated with initial and ongoing suitability of counselling for addictions for each client's needs
- demonstrate an ability to negotiate and agree a contract appropriate to the client's agenda and needs
- demonstrate the ability to establish and maintain effective addictions counselling relationships
- demonstrate knowledge of the role of reviews in addictions, and incorporate appropriately into addictions work
- demonstrate the ability to identify existing and emerging risk, mental health issues and emotional distress, and take appropriate action when necessary
- facilitate the process of referral if and when required.

Content

- Alliance-building factors, such as being respectful, warm, friendly, open and affirming. Exploring clients' expectations of, and concerns about therapy
- Exploring ambivalence, while responding openly and constructively to overcome difficulties with engagement
- Initial and ongoing assessment and formulation skills appropriate for addictions counselling, including:
 - The extent to which the client is engaged with any substance or behavioural addiction
 - Assessing past and current psychosocial impacts and consequences of the addictive behaviour as well as the client's awareness, feelings and beliefs about the addiction
 - Exploring the character of the client's relationships, both supportive and more difficult relationships
 - Assessing client readiness and motivation to change, their ability to tolerate strong emotions and whether counselling is appropriate at this time
 - Facilitating discussion about the range of therapeutic options available as appropriate, to support client choice.
- Negotiation and renegotiation of the contract to take into account the client's changing agenda and needs
- Undertaking periodic reviews in addictions work including administering, using, scoring, interpreting, explaining and recording routine rating scales and alliance rating scales, as well as specific measures relating to working with addictions to understand and track aspects of individual client progress
- Understanding the importance of identifying and responding appropriately to risk, including:
 - Responding to existing and/or emerging addiction-related risk and risk-taking behaviour such as routes of drug administration; risk of overdose, risky or exploitative sexual activity; acquisitive crime to finance addiction; loss of employment, education, accommodation, support networks; driving and/or operating machinery; and vulnerability to exploitation from others
 - How to consider the needs of any children in the family who are in regular contact with the person with an addiction problem, and the importance of providing information on local services for children and families
 - Assessing any signs of memory loss and associated difficulties with day-to-day functioning, along with local knowledge of appropriate additional mental health support clients may be referred to
 - The range of factors associated with risk of suicide and self-harm. Understanding those markers which may indicate a client is becoming suicidal and the ability to develop plans to manage and mitigate the risk.
- Referral options and procedures, for example when:
 - Addictions counselling is not an appropriate support
 - The client's needs fall outside addictions counselling remit
 - Risk is identified that needs additional or alternative support
- Endings in addictions counselling including managing risks associated with endings in addictions counselling such as relapse.

For more information about the competences related to Subject area 3, please refer to the following sections of BACP's *Addictions competence framework*:

Foundational competences 1.3 - 1.9, 1.12

Knowledge competences 2.1.3, 2.1.4, 2.3.1, 2.3.3, 2.3.4, 2.4.1, 2.4.3, 2.5.1, 2.5.4, 2.5.6

Professional competences 3.1.4, 3.1.5, 3.2.1 - 3.2.3

Engagement and assessment competences 4.1.1 - 4.1.8, 4.2.1 - 4.2.5, 4.3.1 - 4.3.7, 4.4.1, 4.4.2, 4.5.1 - 4.5.6

Therapeutic competences 5.1.1, 5.1.2, 5.1.6, 5.2.1, 5.2.3, 5.3.1, 5.3.2, 5.3.5

Meta-competences 6.1 - 6.5

Subject area 4: Facilitating the addictions counselling process

Introduction

This subject area introduces participants to the therapeutic skills, abilities and qualities which all counsellors working in addictions may be expected to possess.

Working in the field of addictions counselling requires significant specialism and expertise, spanning a broad range of theoretical orientations and preferences in approach and interventions. Participants are invited to reflect on how their existing therapeutic modality informs their developing theoretical approach to addictions counselling.

The research underpinning the *Addictions competence framework* suggests that both structured approaches (such as CBT) and more relational approaches (such as psychodynamic, humanistic and person-centred) can be effective in counselling clients with addictions.

Learning outcomes

By the end of this subject area participants will be able to:

- identify, understand and use a range of relevant therapeutic skills, approaches and interventions to support the client to achieve their desired outcomes
- demonstrate the ability to use client feedback to inform the addictions relationship
- demonstrate the ability to form a relationship conducive to change
- reflect on and use theory to understand change processes and inform the therapeutic work
- reflect on existing therapeutic approach.

Content

- The significance and importance of the addictions relationship in determining the quality and efficacy of addictions counselling
- Structured and relational approaches in addictions counselling
- The change process, including using client motivation to set goals and find solutions
- Supporting motivation to change
- Identifying and managing high risk situations associated with the problem behaviour
- Rewarding goal attainment
- The appropriateness, or not, of providing interpretations.
- Keeping discussions primarily about present and immediate future issues
- Questioning beliefs and assumptions that may underpin addictive behaviours
- Identifying possible areas for change and strategies that may be effective if the client decides to change
- Supporting clients in maintaining gains and promoting self-efficacy
- Helping clients explore feelings and emotional conflicts, and develop awareness to emotional stress responses
- The integration of body work, meditation and relaxation training, or mindfulness-based relapse prevention - as appropriate to build on course participants' existing skills sets

- Engaging clients who are family members or significant others to a person living with an addiction. Interventions may include:
 - exploring the impact of addiction on the individual and their relationship with the person living with addiction
 - maintaining a focus on the client's agenda, needs and desired outcomes with neutrality and open minded curiosity to encourage exploration of their experiences in relation to the addicted person in the current situation
 - signposting to appropriate information and guidance such as peer-led mutual aid, family therapy, websites, helplines and other agencies; health, social care, housing and financial advice.

For more information about the competences related to Subject Area 4, please refer to the following sections of BACP's *Addictions competence framework*:

Foundational competences 1.1, 1.7, 1.9 - 1.12

Knowledge competences 2.1.3 - 2.1.5, 2.2.1 - 2.2.4, 2.3.1 - 2.3.6

Professional competences 3.1.5

Engagement and assessment competences 4.1.4, 4.2.2, 4.2.5, 4.3.7

Therapeutic competences 5.1.3 - 5.1.6, 5.2.1, 5.2.3, 5.3.1 - 5.3.5

Meta-competences 6.2, 6.3, 6.5, 6.6

Reading list and resources



Resources

West, R. (2013) *Models of addiction*. European Monitoring Centre for Drugs and Drug Addiction. Available from: https://www.emcdda.europa.eu/publications/insights/models-addiction_en

BACP resources

BACP (2024) *Addictions competence framework*. Available at: <https://www.bacp.co.uk/media/21322/bacp-addictions-competence-framework-august-2024.pdf>

BACP (2024) *Addictions competence framework User guide*. Available at: <https://www.bacp.co.uk/media/21323/bacp-addictions-competence-framework-user-guide-august-2024.pdf>

BACP (2018) *Ethical Framework for the Counselling Professions*. Available at: <https://www.bacp.co.uk/events-and-resources/ethics-and-standards/ethical-framework-for-the-counselling-professions/>

BACP *Good Practice in Action (GPiA)* resources to support members in implementing the *Ethical Framework* in their practice. <https://www.bacp.co.uk/events-and-resources/ethics-and-standards/good-practice-in-action/>

SCoPEd Oversight Committee (2022). *SCoPEd framework: A shared framework for the scope of practice and education for counselling and psychotherapy with adults*. Available from: <https://www.bacp.co.uk/media/14435/scoped-framework-january-2022.pdf>

Nice guidance

NG64 *Drug misuse prevention: targeted interventions* <https://www.nice.org.uk/guidance/ng64>.

NG58 *Coexisting severe mental illness and substance misuse: community health and social care services* <https://www.nice.org.uk/guidance/ng58>

CG120 *Coexisting severe mental illness (psychosis) and substance misuse: assessment and management in healthcare settings* <https://www.nice.org.uk/guidance/cg120>

CG51 *Drug misuse in over 16s: psychosocial interventions* <https://www.nice.org.uk/guidance/cg51>

QS188 *Coexisting severe mental illness and substance misuse* <https://www.nice.org.uk/guidance/qs188>

QS23 *Drug use disorders in adults* <https://www.nice.org.uk/guidance/qs23>

UK Government guidance

Scottish Government and COSLA (2020). *Alcohol and drug use and trauma-informed practice: Companion document*. Available from https://www.improvementservice.org.uk/_data/assets/pdf_file/0015/31029/Alcohol-and-Drug-Use-Trauma-Companion-Pack.pdf

Department of Health and Social Care (2017) *Drug misuse and dependence: UK guidelines on clinical management*. Available from: <https://www.gov.uk/government/publications/drug-misuse-and-dependence-uk-guidelines-on-clinical-management>

NHS (2021) *Help for problems with gambling*. Available from: <https://www.nhs.uk/live-well/addiction-support/gambling-addiction>

Office for Health Improvement and Disparities (2023) *Consultation UK clinical guidelines for alcohol treatment*. Available from <https://www.gov.uk/government/consultations/uk-clinical-guidelines-for-alcohol-treatment>

Public Health England (2023) *Gambling related harms evidence review*. Available from: <https://www.gov.uk/government/publications/gambling-related-harms-evidence-review/gambling-related-harms-evidence-review-summary>

The UK Drug Policy Commission Recovery Consensus Group (UKDPC) (2008) *The UK Drug Policy Commission Recovery Consensus Group: A vision of recovery*. Available from: https://www.ukdpc.org.uk/wp-content/uploads/Policy%20report%20-%20A%20vision%20of%20recovery_%20UKDPC%20recovery%20consensus%20group.pdf

Reading list

Alderson, K. (2020) *Addictions counseling today: substances and addictive behaviors*. Sage.

Best, D. (2019) *Pathways to recovery and desistance: The role of the social contagion of hope*. Policy Press.

Braun-Harvey, D. & Vigorito, M.A. (2016) *Treating out of control sexual behavior: rethinking sex addiction*. Springer.

Cavaola, A.A. & Smith, M. (2020) *A comprehensive guide to addiction theory and counseling techniques*. Routledge.

Chandler, C. (2018) *Addiction: A biopsychosocial perspective*. Sage.

Ferguson G. (2020) Working with addiction. *Healthcare Counselling and Psychotherapy Journal*. Retrieved from: <https://www.bacp.co.uk/media/8368/bacp-healthcare-counselling-psychotherapy-journal-apr20.pdf>

Goodman, A. (1990) Addiction: Definition and implications. *British Journal of Addiction*, 85(11), 1403–1408. DOI:10.1111/j.1360-0443.1990.tb01620.x

Humphreys, K. & Lembke, A. (2013) Recovery-oriented policy and care systems in the UK and USA. *Drug and Alcohol Review*, 33(1):13-8. DOI: 10.1111/dar.12092.

Hall, P. (2019) *Sex Addiction: A Guide for Couples and Those Who Help Them*. Routledge.

Miller, W.R. & Rollnick, S. (2023) *Motivational Interviewing: Helping people change and grow* (4th Ed). Guilford.

Mitcheson, L., Maslin, J., Meynen, T., Morrison T., Hill, R. & Wanigaratne, S. (2010) *Applied Cognitive and Behavioural Approaches to the Treatment of Addiction: A Practical Treatment Guide*. Wiley.

Nutt, D. J. & Nestor, L. J. (2013) *Addiction*. Oxford University Press.

Pita, D.D. (2004) *Addictions counseling: a practical and comprehensive guide for counseling people with addictions*. PublishDrive.

Schneider, J.P. (1994) Sex addiction: Controversy within mainstream addiction medicine, diagnosis based on the DSM-III-R, and physician case histories. *Sexual Addiction and Compulsivity*, 1(1), 19–44. DOI:10.1080/10720169408400025

Schwartz, M.F., & Southern, S. (2017) Recovery from sexual compulsivity. *Sexual Addiction & Compulsivity*, 24(3), 224–240. DOI:10.1080/10720162.2017.1350229

Velleman, R. (2011) *Counselling for Alcohol Problems (Therapy in Practice)*. Sage.

West, R. & Brown, J. (2013) *Theory of Addiction*. Wiley-Blackwell.

Appendix A: Suggested course participant feedback questionnaire

Part one

1. Did your pre-course learning goals change during the course?

2. To what extent have you achieved your learning goals?

3. How did the course help you achieve them?

4. What else might the course have included which would have added to your achievement?

5. How did you find the academic support throughout the course?

6. How did you find the emotional support throughout the course?

7. Do you think the course covered its aims?

Part two

8. Which parts of the course did you find most useful? (Please give reasons)

9. Which parts of the course did you find least useful? (Please give reasons)

10. How satisfactory were the training methods/ exercises used?

11. If you could make one change to the course what would it be?

12. Please add any further comments about the course.

13. Overall satisfaction with the course
(Please circle one number)

Not satisfied at all Very satisfied

1 2 3 4 5 6