

Training Curriculum on Drug Addiction Counseling



Chapter 1&2

Trainer Orientation
What is Drug Addiction Counseling?



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TRAINING CURRICULUM ON DRUG ADDICTION COUNSELING

TRAINER MANUAL



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AUTHORSHIP

Dr. Robert Ali, Director of the WHO Collaborating Center for Research on Treatment of Drug and Alcohol Problems, Adelaide University, Australia

Ms. Vuong Thi Huong Thu, Program Manager, FHI/Vietnam

Dr. Nguyen To Nhu, Program Manager, FHI/Vietnam

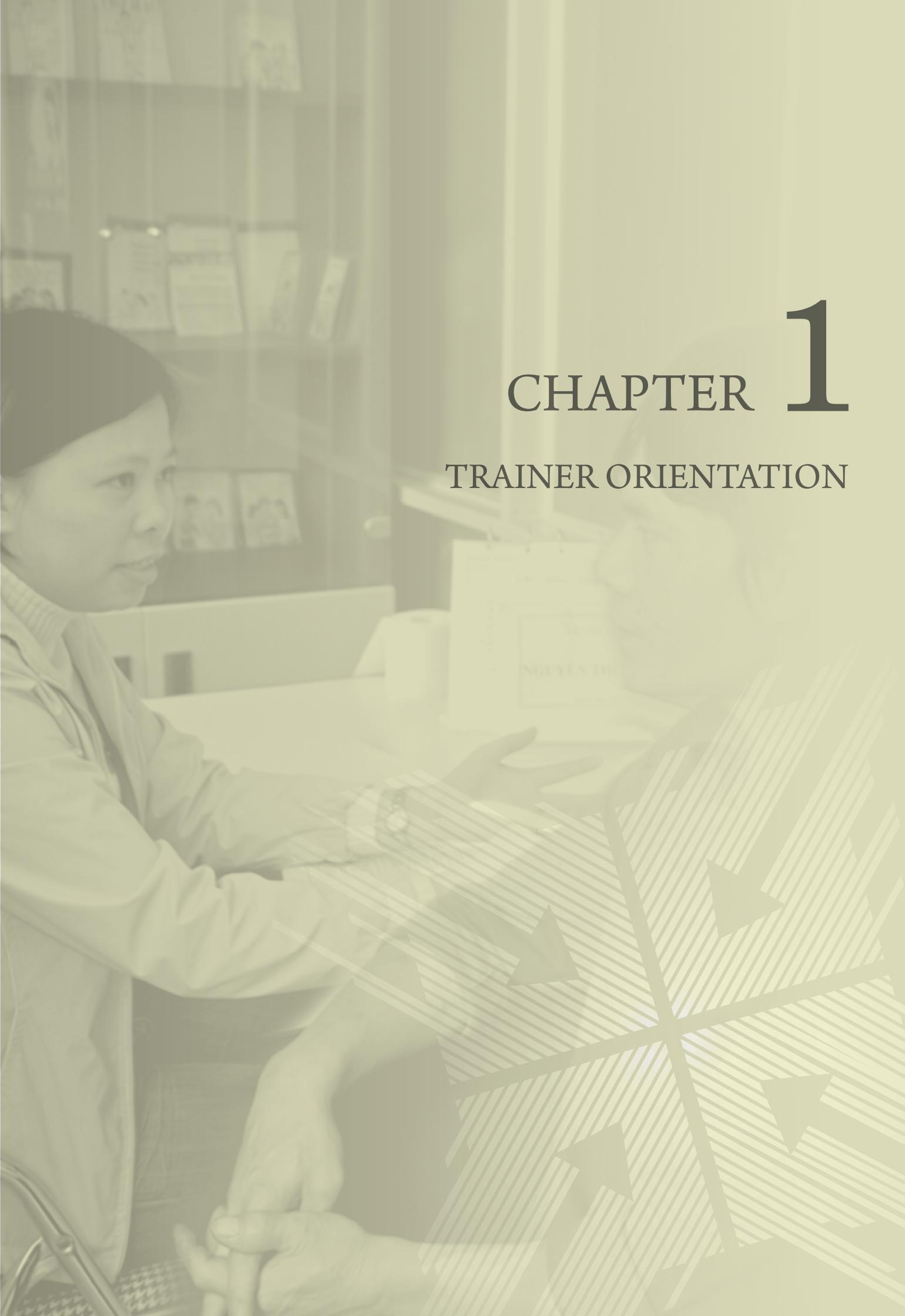
Ms. Pham Thi Huong, former Chief of Vulnerable Populations Section, CDC Vietnam

Dr. Kevin Mulvey, former Senior Technical Advisor, FHI/Vietnam

Dr. Hoang Nam Thai, Program Officer, FHI/Vietnam

Daniel M. Levitt, Editor

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CHAPTER 1

TRAINER ORIENTATION

Introduction

This training curriculum is designed to provide current and future drug counselors the knowledge, basic counseling skills, and techniques needed to help both active and recovering drug users to minimize risk associated with drug use by reducing risky behaviors and reducing or stopping drug use.

Background

According to the Ministry of Labor, Invalid and Social Affairs, the number of drug users in need of risk reduction services and relapse prevention is predicted to grow from 160,226 in 2006 to 268,712 by 2012. In addition, the relapse rate is high: almost 90% of former rehab residents relapse to drug use within 12 months of release in the absence of counseling and social support.

Since July 2005, with support from USAID/PEPFAR, Family Health International (FHI/Vietnam) has been working with Dr. Robert Ali, Director of the WHO Collaborating Center for Research on Treatment of Drug and Alcohol Problems, Adelaide University, to organize a series of training courses on drug addiction counseling for counselors in Hai Phong and Ho Chi Minh City in Vietnam. Initially, the training program was developed for counselors who were working on the pilot transitional program in Ho Chi Minh City, the Hanoi recovering drug user support program, and the pilot methadone maintenance program in both Hai Phong and Ho Chi Minh City. Trained counselors have filled a gap previously unaddressed in Vietnam.

One of the greatest impediments to expanding community-based drug addiction counseling and treatment is the lack of a skilled and confident workforce. Many working in the field have requested easy-to-understand practical information on drug addiction counseling. Prior to the development of this manual, there was no training manual or textbook in Vietnamese to assist in training counselors. After training five training cohorts and after providing three training of trainers courses, FHI/Vietnam, in collaboration with Dr. Robert Ali, developed a Training Curriculum on Basic Drug Addiction Counseling to train trainers. The goal was to provide a quality and easy-to-implement training curriculum to assist in developing a professional cohort of drug counselors.

There is great need for counseling services in community- and center-based drug treatment programs. The introduction of the pilot integrated methadone maintenance therapy program in Vietnam (April 2008) has become a significant platform for the introduction of quality counseling for patients and their family members. This is an opportunity to change the current counseling approach from “telling and giving advice” to a contemporary, evidence-based cognitive behavioral counseling approach. There is significant demand for risk reduction, including drug addiction counseling and relapse prevention interventions in both closed and community-based settings for drug users, recovering drug users, and their families.

This training curriculum development was based on international best practices, modified for Vietnam's context and culture. The curriculum includes examples, case studies, and teaching experiences from the first five cohorts of drug counselors in Vietnam. The training curriculum aims to train drug counselors working in the following different settings/ services:

- i. Methadone counselors working in outpatient clinics providing methadone maintenance treatment
- ii. Drug counselors working in transitional programs to support recovering drug users and returnees from 06 centers (Vietnam government rehabilitation centers)
- iii. Drug counselors working in drop-in centers (a model of IDU interventions integrated with counseling services) to serve active drug users through risk reduction measures, and recovering drug users in the community
- iv. Drug counselors working at 06 centers and other government and private drug treatment facilities

It is clear that 'counseling interventions' are rarely successful in isolation. They need to be supported by families, community leaders, peers, teachers, employers, etc. Peer educators and counselors can provide much needed support to young people when they try to reduce the drug-related problems they are experiencing and/or remain drug-free.

This training curriculum attempts to provide a 'how to' guide for the basic principles of counseling, key counseling skills, relapse prevention and supervision and support. It employs relevant examples, accessible web-based resources, and templates. It is NOT a textbook on counseling, and does not attempt to replace face-to-face, facilitated training. Hopefully the techniques illustrated in this training curriculum will assist those who are ready, and/or willing to address their substance use-related difficulties.

In addition to information gathered during the training courses conducted by Dr. Robert Ali, much of the materials in this training curriculum come from the following primary sources:

1. Treatment Improvement Protocol (TIP) Series. Substance Abuse and Mental Health Services Administration's SAMHSA/Center for Substance Abuse Treatment (CSAT). <http://www.ncbi.nlm.nih.gov/books/bv.fcgi?rid=hstat5.part.22441>
2. John Howard, (2006). A Toolkit for Building Capacity For Community-based Treatment and Continuing Care of Young Drug Abusers in The Greater Mekong Subregion. The United Nations Economic and Social Commission for Asia and the Pacific.
3. Jarvis, T., Tebutt, J., Mattick, R & Shand, F.(2005). Treatment Approaches for Alcohol and Drug Dependence: An Introductory Guide, 2nd Edition John Wiley & Sons Ltd., Chichester, England.
4. Mason, P. (1997). Respecting Choice: Brief Motivational Interviewing, National Centre for Education and Training on Addiction (NCETA), Flinders University, Adelaide.
5. McDonald, J., Roche, A.M., Durbridge, M. & Skinner, N. (2003). Peer Education: From Evidence to Practice. An Alcohol and Other Drugs Primer, National Centre for Education and Training on Addiction (NCETA), Flinders University, Adelaide.

6. Miller, W. & Rollnick, S. (1991). 'Motivational Interviewing' Preparing People to Change Addictive Behaviour, The Guilford Press, New York, pp. 56–62.
7. Daniel D. Squires & Theresa B. Moyers. 'Motivational Interviewing' A Guideline developed for the Behavioral Health Recovery Management Project. University of New Mexico Center on Alcoholism, Substance Abuse and Addictions, Albuquerque, New Mexico.
8. G. Alan Marlatt, George A. Parks, Katie Witkiewitz (2002). Clinical Guidelines for Implementing: A Guideline Developed for the Behavioral Health Recovery Management Project.
9. Ask, A., & Roche, A.M. (2005). Clinical Supervision: A Practical Guide for the Alcohol and Other Drugs Field. Adelaide: National Centre for Education and Training on Addiction, Flinders University, Adelaide, Australia.
10. Kesting, G. (2001). Dealing with aggressive and potentially violent behaviour. Achievement Awareness Training.
11. National Centre for Education and Training on Addiction Consortium. (2004) Alcohol and Other Drugs: A Handbook for Health Professionals. Australian Government Department of Health and Aging.

Overall Training Goal and Objectives

Overall goal

To provide counselors with knowledge on drug use and its consequences, drug treatment modalities, drug addiction counseling techniques, and relapse prevention therapy to enhance the effectiveness of their work with current and recovering drug users.

Objectives

By the end of this training curriculum, participants will be able to do the following:

- Describe the roles and responsibilities of drug counselors
- Explain the principles and practices of drug addiction counseling
- Describe common drugs, drug use patterns and consequences of drug use, as they applies to Vietnam
- Explain the basis of drug addiction, recovery and relapse
- Explain basic information about different models of drug addiction treatment including:
 - abstinence- and reduction-based treatment models
 - substitution treatment models
- Explain drug treatment services available in Vietnam
- Explain factors influencing successful drug addiction treatment
- Describe the counseling process
- Describe the components and steps involved in conducting a client assessment
- Develop an individualized management plan and provide on-going follow-up and support

- Develop basic drug treatment counseling skills and techniques in the following areas:
 - Client assessment
 - Motivational interviewing
 - Goal setting
 - Problem solving
 - Counseling skills
 - Relapse prevention with a focus on:
 - Managing high-risk situations
 - Refusal skills
 - Coping with cravings
 - Dealing with lapse and relapse
 - Stress management
 - Time management
 - Conflict resolution
 - Anger management for clients
- Work with special populations
 - Families
 - Youth
 - Women
 - Intoxicated clients
 - Aggressive clients
- Risk reduction counseling for active drug addiction users who are in the pre contemplation stage
- Clinical support and supervision for drug counseling including self-care

The Learning Approach

The learning approach includes the following:

- Presentations and discussions
- Small-group and partner-to-partner exercises
- Role-playing
- Demonstrations;
- Practicum on real clients
- Reflective writing exercises
- Course examination
- Course evaluation

Exercises

Role-plays and other practice exercises are an important part of the training approach. Trainers should be actively involved in helping participants feel safe and learn from these experiences by doing the following:

- Ensuring that participants understand what they are to do or observe
- Affirming role-players' risks taking
- Being available to offer assistance as needed
- Debriefing role-players using nonjudgmental language and tone

The Curriculum Package and Training Structure

The curriculum package includes the Trainer's Manual, a corresponding Participant's Manual (provided to participants separately), and a CD-ROM with a PowerPoint presentation for each chapter. A description of the Trainer's Manual begins on Page 13.

The Participant's Manual contains a participant orientation, and for each lesson in each chapter it contains the following:

- Goals and objectives
- PowerPoint slides printed six to-a-page with space for notes
- Handout materials containing additional information or exercises

Trainers must provide each participant with a notebook to use as a personal journal. Participants may use the journal to note any or all of the following:

- Topics they would like to read more about
- Concepts they would like to think more about
- Techniques they would like to try
- Possible barriers to using new techniques; and
- Ways they might be able to build on their practices based on lessons learned

Trainers will also be guided on when to assign targeted writing exercises.

This Trainer's Manual provides detailed instructions for presenting nine chapters. The chapter structure allows for flexible training; sessions within chapters can be arranged around busy schedules. The authors advise that this training be delivered as a set of two four- or five-day training courses: basic and advanced, with at least three months of practicum between. During the advanced training course, trainers should review participants' knowledge, skills and techniques learned in the basic course. New techniques and knowledge training in the advanced session commences in Chapter 7 of the curriculum. The advanced training course also includes a framework for supportive supervision in drug addiction counseling, including self-care, to prevent burnout.

The Training Group

A training environment that includes a mix of participants with diverse experiences often facilitates peer-to-peer teaching and learning.

Ideally, the training group should be large enough to be split into three small groups of three members, but the training can be adjusted for smaller groups. The training group should be comprised of the same members throughout the course. Since this is a skills-based training course with multiple practicum sessions and interactive activities, class size should not exceed 18 participants. The preferable class size is 15 participants.

Participants will likely undergo various changes during the training. Trainers should maintain a positive, empathetic, objective, and understanding attitude throughout the training. By doing so, the trainer can model an appropriate approach to working with clients.

A certificate will be given after satisfactory completion of the advanced training course. To receive a certificate, participants are required to: (1) attend all sessions for both the basic and advanced training courses; (2) actively participate and contribute in class; (3) demonstrate sufficient skills and techniques with clients; and (4) pass a written exam (for examples of the written exams, see Appendix III).

The Trainer

This curriculum is designed to be implemented by individuals with previous training experience. The trainer should have undergone training and have reasonable familiarity with the subject matter. A trainer should have the following knowledge and skills:

- Working knowledge of the curriculum contents
- Experience working with the client population
- Experience using the techniques taught in this course
- Experience using adult learning techniques with a client-centered approach
- Basic ability to facilitate groups
- Understanding of, and sensitivity to, cultural issues specific to both the participants and the treatment populations
- Ability to work with participants in a positive, empathetic manner

Including a co-trainer is necessary to provide complementary experience and knowledge and to help the trainer facilitate. The co-trainer may also answer questions, participate in activities, practice techniques with participants, and relate training material to real-life situations. The training team is ideally composed of those who have experience in providing drug addiction counseling, a solid theoretical background in general counseling, an understanding of HIV prevention and treatment, and sound teaching skills. It is crucial to have one trainer in the training group who has experience as a drug counselor and can demonstrate all skills and techniques taught in the course. Trainers must have a good understanding of the needs of their training group and be prepared to adapt the training accordingly. For example, the trainer should be able to do the following:

- Simplify the language (particularly clinical terms and jargon) to make concepts easier to understand
- Allow time for participants to understand concepts that may be foreign to them
- Adapt writing exercises for those with lower literacy levels

In addition, trainers must be sensitive and creative in the way they introduce exercises and elicit participation. For example, when appropriate, trainers may want to incorporate traditional storytelling into their training approach.

After passing the TOT training course, trainers will be assisted to conduct training sessions themselves. Initially, they will be paired with experienced trainers. Over time, when their training methodology has been adequately developed, they can independently conduct training with their assigned groups.

Using the Trainer's Manual

Although session instructions come complete with examples, trainers should also supply their own specific examples. Whenever possible, trainers should give examples of particular techniques they have used with clients. They should discuss adaptations that were necessary when applying those techniques with particular ethnic, cultural, or gender groups. It is also important that trainers ask participants to supply examples from their own work to ensure that the training addresses their specific needs.

This orientation kit includes preparation instructions for pre-training activities (see Getting Started) and general preparation that applies to all modules (see Before every unit). In addition, each session in the manual includes:

- a unit overview, including goals, objectives, and content timeline
- copies of the PowerPoint slides with detailed presentation notes and exercise instructions
- handouts and materials included in the Participant's Manual

Session-specific preparation

Each chapter contains a number of related units (training sessions)

Unit Overview

The preparation checklist in each unit is followed by an overview including the following:

- Goals and objectives for the unit
- Unit contents
- Teaching aids
- Timetable

The training agendas for the two four to five-day training courses (see Appendix I) are included for planning. Actual times will vary depending on the training group's size and participation experience. Based on participants' learning needs, trainers may want to spend more or less time than is indicated for a particular topic.

Presentation instructions

There are PowerPoint slides with teaching notes underneath each slide to help the trainer understand and emphasize key points for the slides. The trainer should feel free to use his or her own words, and add his/her own examples. Adding real-life examples or using examples given by participants in the class stimulates participants to engage in the learning process and will aid transfer of the unit contents to participants.

Teaching notes include three kinds of headings: "**Say**", "**FYI**", and "**Teaching instructions**".

Notes with a heading of "**Say**" are provided as suggested language for the kinds of things that you might say directly to participants, written much like the script of a play. These notes are always in italics.

Notes with a heading of "**FYI**" (which means For Your Information) are meant to provide the trainer with useful information that may assist him or her in training on the particular topic on the slide. These are not meant to be read or spoken to the class.

Notes with a heading of "**Teaching instructions**" provide trainers and co-trainers with tips for facilitating an exercise or activity associated with a topic in the previous, current, or upcoming slide.

Trainer notes throughout the chapters offer alternative approaches or special considerations. These are not meant to be read or spoken to the class.

Getting Started

Careful preparation and planning will help to ensure trainings are successful.

1-to-2 months before the first training session

- Determine who will attend the training
- Assess participants' background and needs to adjust the training to suit their needs
- Develop an overall schedule for the training, including dates and times for each module
- Arrange for the training space and equipment

Notes about the training space and atmosphere

An attractive, well-organized training space can enhance participants' learning experience. Trainers should select a space that is large enough to accommodate participants, allowing room for dividing the group into smaller groups for group activities. Seating small groups in a U-shape or at round tables is ideal.

Trainers can create colorful posters for the training room. Posters help to present key concepts, such as the Stages of Change Model (Chapter 4).

The training includes role-plays and other practice exercises. It is important that the training space provide privacy for these activities.

Playing music softly as participants enter the training room can help to create an inviting atmosphere.

Provide tea, coffee, water, and snacks for tea breaks. This will encourage participants to mingle and talk with one another during breaks. Provide information on places to get lunch, if you will not be providing it.

1 to 2 weeks before the first training session

- Prepare a schedule for the training, listing dates and times for each session
- Select background music to be played during non-instructional sessions

- Prepare Attendance Certificates for participants (participants should receive the certificate to reinforce that they have experience, skills, and insights to offer to the group, and to encourage them to share their knowledge during the training)
- Ensure that you have enough copies of the Participant’s Manual
- Obtain a small package of fine-tip colored markers for each participant (or, if participants will be seated in small groups at tables, one large package of markers for each table)
- Obtain notebooks for participant journaling
- Arrange for audiovisual equipment if needed
- Prepare the PowerPoint presentations
- Read through the entire training manual

1 to 2 days before the first training session

- Finalize room and equipment arrangements
- Load the PowerPoint slides onto the laptop
- Set up the room
- Prepare name badges
- Make copies of the first day’s evaluation form
- Make copies of the overall training schedule/agenda
- Gather all supplies, including the Participant’s Manuals and evaluation forms
- Review before every training session (below)

Before every unit

Review this checklist before presenting each unit.

The training space

- Arrange chairs for each session in a comfortable way, keeping in mind that space is needed for any small- and large-group exercises
- Prepare appropriate posters to list or illustrate key concepts and terms, and post them around the training room
- Post the newsprint pages generated during the previous sessions for use as a review (save all newsprint pages and posters generated during the training to use as a review during the final session)
- Create a relaxed atmosphere by playing background music as participants gather

Equipment and materials

- Tape or CD player for instrumental background music
- LCD projector and screen, and laptop
- Flipchart paper, easel, and crayons or markers
- Evaluation forms
- Pins, tacks, or tape to post flipchart paper on walls
- Pens and colored markers (or pencils) for participants
- A timer (optional, but recommended)

General preparation

- Confirm participants' registration and training room arrangements
- Review the preparation checklist for the module(s) you will be presenting
- Assemble and test necessary equipment, materials, and supplies
- Have fun!

Making ground rules

Training ground rules are important to start the training course and in some cases will require reviewing each day. Facilitate a group discussion on training ground rules and write them on flipchart paper. Summarize the ground rules and post the sheet on the wall for the entire training course. Explain that these rules are important to help everyone focus and get the most out of the training. Ask participants whether they would like to add anything to the list each day.

Suggested key ground rules include the following:

- All comments will be respected
- Everyone has the right to his/her opinion
- Questions can be asked throughout the training
- Turn off cell phones or put them on vibrate
- Check email and text messages only during breaks
- Start on time and finish on time
- Provide constructive and friendly feedback
- One person speaks at a time
- No side talking during the training