



WELCOME!
JOIN US 30 JUNE+1 JULY 2025

Join DB Recovery+ UKESAD

*Coming of age: 21 years of humanising addiction recovery
raising the quality of outcomes*

30 JUNE+1 JULY at the 5* Chelsea Harbour Hotel
London SW10

Join colleagues, learn, gain CEs, belong, have fun
at

**THE UK'S MOST POPULAR CONFERENCE
ON ADDICTION RECOVERY**

How to deal effectively and confidently with
people who have drug and alcohol problems

YOU CAN ATTEND ALL 28 PRESENTATIONS!
No hard choices: Sessions are plenary so that
delegates can naturally meet up – and not miss
any worldclass specialist or lifesaving knowledge.

ORGANISED BY PEOPLE IN RECOVERY
to help others achieve and enjoy drug-free lives

HONOUR YOUR CAREERS AND WORK
People working with addicts deserve the best for
their high calling – be recognised here.

COMPREHENSIVE, VITAL TOPICS – & CEU/CPDs
Get a great overview, from the neuroscience of
addiction to prevention, treatment and mutual-
aid research – not forgetting family supports,
dual diagnoses, contacts and more...

ALSO:

DB RECOVERY+MCLEAN RECOVERY AWARDS
The Oscars of the addiction recovery field
recognise and applaud unsung heroes of
addiction treatment and recovery.

www.recoveryplusdb.com

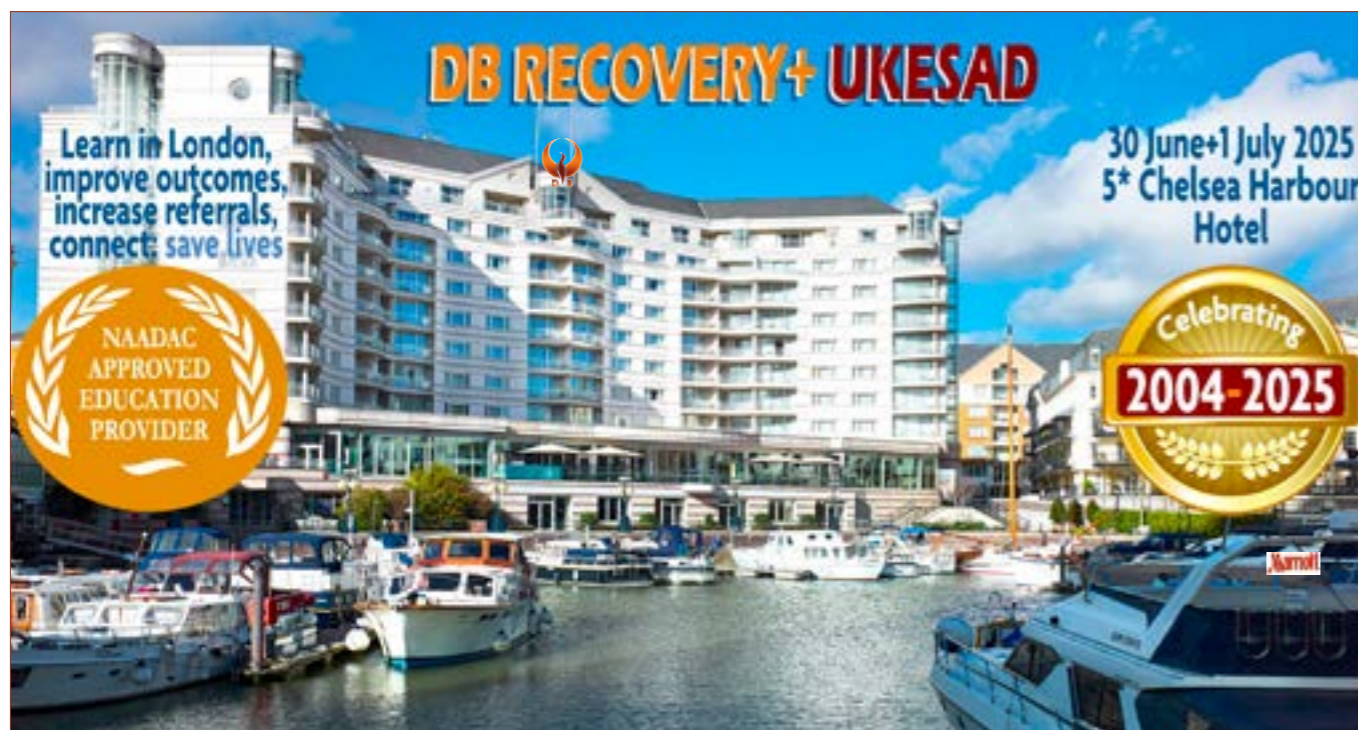




Where: the venue



Clockwise: lobby leading to lifts+stairs, a restaurant, part of the hotel spa, 5* lunches will be provided, convenient tables in the presentation room



Welcome!

Join us for DB Recovery+ UKESAD: cost-effective, time-effective, enjoyable training in how to save and enhance lives – while also meeting supportive, helpful colleagues and future colleagues.



In the course of your work, do you increasingly encounter patients/clients with alcohol or drug problems or addictive behaviours? Are you confident that you are doing the best for them – and yourself, that you are following best practice? If your answers are “yes”, “no” and “no”, then this intense fully-rounded ‘crash course’ in how to recover from addiction is for you. You will meet more people and learn more at DB Recovery+UKESAD than you could from months of research.

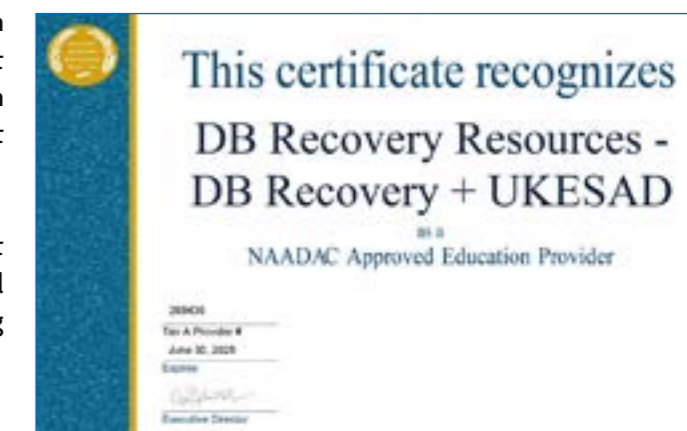
In response to demand, this year's DB Recovery+ UKESAD conference on how to help people recover from addictive substances and behaviours is dedicated to both experts (hello again!) and those who more and more often in the course of their work come face to face with people who have alcohol and drug problems, but who are not specifically trained to handle them. It is hugely rewarding to witness experts and those thirsting for knowledge meet up with each other and forge long-term professional relationships which are mutually supportive and help vulnerable people in our care.

Gain CEs/CPDs and attendance certificate... Be confident in handling clients with complex needs... Feel safely confident treating clients with trauma... Prevent relapse... Know when to refer and who you can safely refer to... Create a support network... Meet new colleagues and old friends!

Our founder-organiser has led the field since the first UKESAD symposium way back in 2004, with an international following from five continents and record-breaking attendance. So come join us to save lives...

The days are packed with information and opportunities – but conferences are what you make of them. Conversations can be more valuable than the sessions, no matter how excellent. So, to nurture networking and help you forge contacts useful for your work, we are limiting DB Recovery+UKESAD to one stream of trainer presentations, so that delegates are seated with each other and can ‘bump’ into each other for natural, spontaneous networking. As well as meeting potential colleagues and old friends, take a social wander round the exhibitor stands. These offer opportunities to chat with the companies involved as well as with fellow attendees interested in what they offer. There is a seated lunch with a choice of hot meals and salads at the conference venue which offers more opportunities to meet people. And take a leisurely stroll by the Thames to see iconic attractions (see opposite).

All delegates can receive an attendance certificate, and can be awarded (fill in evaluation form) up to 14 gold-standard NAADAC/NCC AP internationally-recognised CEs/continuing education credits.





Decades of learning and collaboration

The Forward Trust reflects on DB Recovery+UKESAD 2024 – and the lead-up to it over the past 20 years, including the role of its CEO Mike Trace who gives a governmental context.



“ On July 1st and 2nd, 2024, the Chelsea Harbour Hotel in London was a hive of recovery-focused activity. Over 300 practitioners and professionals in addiction treatment gathered for the 20th Anniversary of the UK/European Symposium on Addictive Disorders. This year's conference was especially significant as it marked two decades of collaboration, learning, and innovation in addiction treatment. Mike Trace, CEO of Taking Action on Addiction (a campaign ran by The Forward Trust), was honoured to deliver the opening plenary speech.

Origins of UKESAD.

Mike Trace shared the humble beginnings of UKESAD, which started at his kitchen table in London around 2003. What began as a conversation with Deirdre Boyd evolved into the first UKESAD conference in 2004. After spending seven years working in government, the EU and the UN, Mike was perfectly placed to join this pivotal conversation about addiction treatment. Their aim was to bring together recovery voices and create an arena where the recovery and harm reduction sectors could work collaboratively. The goal was to promote the idea that both public health measures and abstinence-based treatment were essential

elements of the 'menu' of treatment services offered in every part of the country. Mike emphasised that this project was a critical initiative to bridge the gap between the polarised schools of thought around treatment prevalent in the 1980s and still lingering in 2004.

Mike paid tribute to Deirdre Boyd for her incredible work in bringing together people on a clinical, ideological and human level. The relationships and connections made at these events have undoubtedly helped hundreds of thousands of people begin their journey to recovery. Deirdre's support for RAPt, Action on Addiction, Clouds House and now the Taking Action on Addiction campaign and Forward Trust has been invaluable.

History of UK state-funded treatment sector across four general elections.

Mike provided a fascinating overview of how changes in government impacted addiction policy and treatment funding over four election cycles. First, in 1997, under New Labour, Prime Minister Tony Blair expressed concern about the impact of illegal drugs, leading to the appointment of a drug czar. Although Blair had no strong opinion on addiction, one of his briefs was “Don't make us look soft on drugs”. Mike Trace was appointed as the government's deputy drug czar that year. The good news was that Blair understood some of the societal consequences of addiction, particularly the cost implication for health services, and was willing to “spend to save”. Between 1999 and 2006, the state-funded budget for addiction treatment saw a significant increase, rising from £200million to over £1billion per annum. During this period, efforts were made to create a national system with a menu of services, which was largely successful – although,

at the scale that was needed, it became messy and dragged down by bureaucracy.

In 2010, under the leadership of Cameron and Clegg, there was high level political interest in addiction and policy reform, but competing interests and priorities. Cameron had a good understanding of addiction and a desire to create a better support system. However, ideological differences in the Cabinet existed. Iain Duncan Smith believed very much in the option of abstinence-based recovery, while Theresa May believed more in controlling the bureaucracy. The civil service resisted attempts to give Duncan Smith's ideas a fair trial, and there was no real enthusiasm from the rest of those in charge. Theresa May's vision won. This meant that there was no government 'enthusiast' for funding addiction treatment. The introduction of austerity after the global economic crisis thus led to a 35% cut in funding, disproportionately affecting recovery programmes and high-cost services. This era is sometimes painted as a recovery-focused period, but this is misleading. It was the opposite.

Despite high demand and good evidentially proven outcomes, many residential treatment centres struggled and closed due to withdrawn or inconsistent state funding. Those with a mix of clients and enough income from the private sector to balance their books survived to treat more clients – Clouds House being one of them.

In 2019, the [Carol Black report](#) highlighted the sector's struggles during austerity. The Boris Johnson-led 2021 spending review led to funding increases, but these mainly replaced lost funds rather than transforming the sector. Residential treatment centres saw the lowest funding.

In 2024, following the confirmation of a Labour government, Mike predicted minimal changes in addiction policy, for now. The focus will remain on competent management and continuing the 10-year strategy. The sector needs to raise the profile of addiction and recovery, calling for public and parliamentary support. Taking Action On Addiction, including our leading annual national campaign, Addiction Awareness Week, is one such initiative, and Mike called on all those present to support it.

Forward Trust's other presentation.

Forward Trust delivered another groundbreaking talk at the conference. Matt Thomas and James Hansen presented about the [link between addiction and ADHD](#). They described how treating ADHD as a co-occurring disorder during an addiction treatment episode can reduce the chance of relapse. James, an addiction therapist and ADHD life coach, described how Clouds House incorporated treatment for co-occurring addiction and ADHD into its treatment plan.

Conclusion.

Governments may come and go, but the eternal truths about addiction and our service responses remain. While Taking Action on Addiction and The Forward Trust remain committed to collaborating with the government in power to ensure that as many people as possible receive a comprehensive array of services to address their addiction, UKESAD continues to be a crucial gathering for professionals in the field to reconnect, learn and discuss new developments.

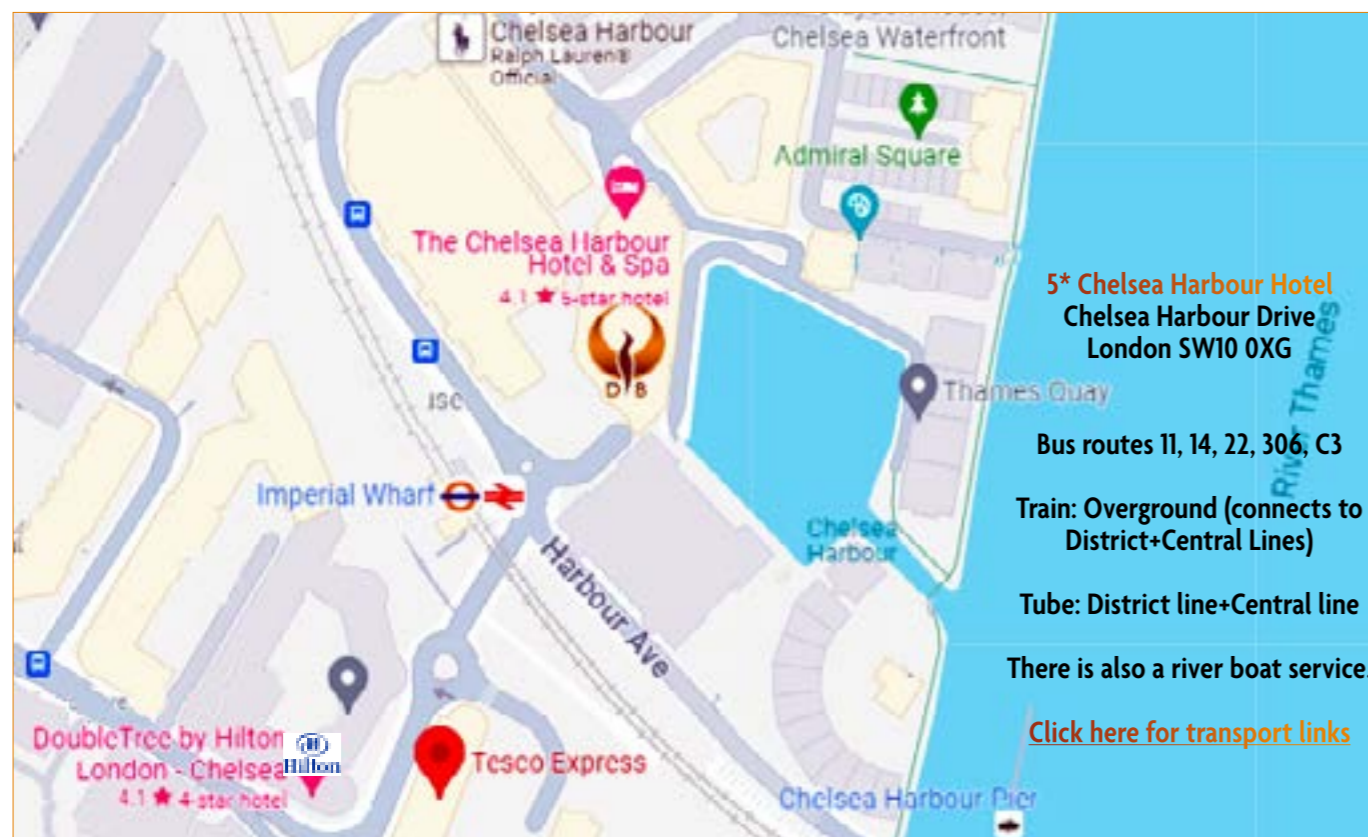
The 20th anniversary conference was a resounding success, and attendees left with renewed energy and ideas to continue providing the best possible treatment to their clients.

About the author

[The Forward Trust](#) is a national organisation, with services located in almost all regions of England and Wales. It has over 70 service delivery projects, with more than 20,000 clients per year supported by 700 staff and 150 volunteers. 30% of its workforce have lived experience of the issues it seeks to address.



Where: the map



Who, what: presenters, topics

A conference/training by people in recovery for people in recovery and anyone affected by addiction: therapists, politicians, psychiatrists, doctors, nurses, healthcare workers, educators, advocates, families. Learn, catch up with friends old + new, hone your skills, earn up to 14 NAADAC CE's /CPDs.

MONDAY 30 JUNE 2025 - GRAND BALLROOM


Delegates can participate in ALL 28 presentations – no difficult choices to limit your speaker/topic choices! That's 14 intense presentations each day, enjoying the company of ALL your fellow delegates.

ARRIVAL 8.00-9.20AM: REGISTRATION + REFRESHMENTS

Have a coffee/tea and cookies, meet and greet friends old and new and/or join mindfulness and mutual-help meeting.

8.00AM 'OPEN' 12-STEP MEETING (1 HOUR)

chaired by a long-term member of 12-Step fellowships who is also a qualified therapist



For people in recovery to get a sense of belonging right from the start, and for professionals and carers who want to witness how mutual-help works. Both the World Health Organisation and UK health watchdog Nice recommend mutual-help groups, particularly the 12-step based ones – and delegates will hear of their benefits in key presentations throughout the conference. But how do they work? This confidential but open meeting is for members of 12-step fellowships and for interested professionals who want to learn and experience more of what their clients are doing and feel more confident in recommending and understanding the processes.

- Learning objectives: At the end of this meeting, delegates will be able to:**
- ① Describe the procedures of a 12-step mutual-aid meeting, its organisation and facilitation
 - ① Impart to others how mutual-aid 'fellowship' members share experience, strength and hope
 - ① Explain to people in need of help how they can gain and sustain recovery from addictive behaviours through mutual-aid meetings.

9.20AM WELCOME + HELPING PEOPLE INTO RECOVERY FROM ADDICTIVE BEHAVIOURS

from Deirdre Boyd, owner of DB Recovery Resources



Recovery from addiction is possible; this symposium demonstrates it in action, and the research behind it.

For three decades, Deirdre Boyd has been a leader in the field of recovery from addiction, with an international reputation: she "inspires the inspirers". Based in the UK, she heads up DB Recovery Resources which supplies a daily news service to the international alcohol/drug-treatment field on addiction recovery, offers an archive of over 38,000 news-research items, publishes Recovery Plus journal, and organises the DB Recovery+ UKESAD international trainings on addiction recovery: the UK's largest event marking the UN's and WHO's World Drug Day. Most recently invited in 2021, by the deputy Prime Minister, to submit addiction treatment/recovery research and evidence, she has spoken at the All Party Parliamentary Drugs Misuse Group, the APPG Alcohol and the APPG on Children and Cannabis, was part of the dti Foresight Project on Brain Science, Addiction & Drugs which predicted drug scenarios for the next 25 years. Deirdre has been quoted in House of Commons and House of Lords debates on alcohol and drugs, and contributed to the Drug Policy 2010 and Select Committees. She authored *Addiction & Recovery: self-help for friends, families and addicts*, which was translated into 7 languages. Deirdre served on the board of the International Certification & Reciprocity Consortium UK & Europe CIC which had 45,000 members at the time. She served on the board of the National Association for Children of Alcoholics (UK) and sat on the Centre for Policy Studies' Addictions committee. Deirdre was voted by the public to receive the Directory of Social Change Influencer Of The Year Award 2012. The International Council on Alcohol & Addictions presented her with the 'Dr Vincent Bakeman Memorial Award for Outstanding Community Services'. She has also received a Sierra Tucson Award for Outstanding Achievement.



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*Thank you to sponsors
who subsidise delegate places
to raise quality standards
and support carers –
and ultimately their clients.*

9.30AM DELIVERING A RECOVERY-ORIENTED SYSTEM OF CARE: PROGRESS MADE AND WORK TO DO presented by Edward Day BA, BM, BCh, DM, MRCPsych



Ed Day will describe the progress developing an understanding of recovery in national policy in England over the past 5 years. He will outline the evidence base for Recovery Support services, their place in a ROIS, and the crucial role of Lived Experience Recovery Organisations. Delegates will learn how this evidence base is influencing commissioning of services in each local authority in England, and highlight 2 innovative projects to capture the voices of people in active addiction and those in recovery. Understand the work that still needs to be done, including developing the peer support worker role, building a UK evidence base for recovery housing, collegiate recovery and peer-led interventions, and measuring recovery capital on a national level.

Learning objectives: At the end of this presentation, delegates will be able to:

- ① Describe the evidence base for Recovery Support Services
- ① Narrate the role of Lived Experience Recovery Organisations in the continuum of care for addictive behaviours
- ① Impart the importance of the Peer Support Worker role in the Recovery Orientated System of Care for addiction.

Dr Day pioneered the Better Than Well university collegiate programme at the University of Birmingham and collaborates with other universities on these. He is also the UK government's drug Recovery Champion. He is a clinician who has led the orientating of clinical practice towards recovery and has a research interest in recovery support services and mutual aid. He is a clinical reader in Addiction Psychiatry at the Institute for Mental Health at the University of Birmingham, and a consultant psychiatrist with Birmingham and Solihull Mental Health NHS Trust. He has been an expert advisor on addiction issues to Public Health England and the Department for Transport and is currently the President of the Society for the Study of Addiction. Dr Day's research has focused on the broad theme of effective treatment interventions for drug and alcohol dependence. This has involved a combination of projects utilising: medication or psychosocial interventions, projects exploring methods of implementation and research into the organisational factors associated with effective outcomes. In 2008 he set up an MSc programme in the Treatment of Substance Misuse at the University of Birmingham and remains active in teaching at both undergraduate and postgraduate levels.

10.00AM INTRODUCING BACP'S ADDICTION COUNSELLING COMPETENCE FRAMEWORK AND CURRICULUM

presented by Gabriel Wynn HCPC Reg, AFBP's, FHEA, MBACP and Sue Critchley MBACP



UK addiction counsellors and therapists have been waiting decades for recognition by the British Association for Counselling and Psychotherapy, which now has 72,000 counsellors and psychotherapists as members. It recently produced BACP competence frameworks to provide evidence-based guidance on the knowledge, skills, abilities and qualities that support effective counselling and psychotherapy practice with specialist populations and settings. BACP curricula are mapped to the competence frameworks, and offer guidance on minimum training standards, course content and learning outcomes for specialist training programmes.

Overview the development, content and structure of the addictions counselling competence framework and accompanying curriculum. Watch a live demonstration of how the framework might be used in a supervisor-counsellor supervision discussion to support counsellor practice development in helping clients with addiction.

Learning objectives: At the end of this presentation, delegates will be able to:

- ① Locate BACP's Addiction competence framework and curriculum
- ① Give an overview of the Framework and curriculum content
- ① Describe how the framework can be used to support counselling practice development.

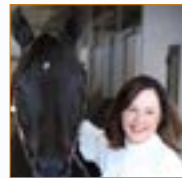
Gabriel Wynn joined BACP in 2023 as the Competence Development Lead. She is an HCPC registered counselling psychologist and BACP accredited counsellor. She has been in clinical practice for 30 years with a specialism in community eating disorders service management. Her achievements include: BPS Chartered, HCPC Registered Counselling Psychologist, BPS Registered Applied Psychology Practice Supervisor, Associate Fellow – British Psychological Society, Fellow – Higher Education Academ, Accredited Registered Psychotherapist – British Association for Counselling and Psychotherapy, EMDR Therapist, ORCID 0000-0002-4317-7098, Web of Science KIE-3656-2024. Previously: New Jersey USA Licenced Professional Counselor (LPC) and US National Certified Counselor (NCC). Her research interests include novel and adapted qualitative methodologies; counsellor competence; client factors in therapeutic outcomes; professional use of language and concepts; epistemic justice. Her practice centres on supporting adults recover from eating disorders arising from traumatic circumstances.

Sue Critchley is an external assessor and verifier role for a national counselling qualifications awarding organisation – and is also employed in BACP's Professional Standards team where she has worked on several competence and curricula development projects, including the addictions competence framework. She is a BACP accredited counsellor with almost 20 years' experience in various settings including private practice. She has taught counselling since 2010 including levels 2-6 at FE college, then joined the tutor team on the MSc in Counselling in the School of Psychology at Bangor University. She runs her own training centre offering counselling supervision training.



10.30AM TRAUMA-INFORMED LEADERSHIP AND POST-TRAUMATIC GROWTH: WHY THEY MATTER

presented by Jaime W Vinck MC, LPC



The effects of trauma often spill over to the workplace, affecting the mental health and performance of individuals and teams, as well as the success of the business. This is critical in the addiction treatment and recovery field where the vast majority of carers treat not only their clients' trauma but have worked on processing their own. Leadership is first and foremost a relationship involving the ability to connect and create trust, so it follows that trauma impacts our ability to work with, and lead others. Explore ways to use Trauma Informed Leadership and related tools, to be the best version of ourselves possible in both our personal and professional lives.

Learning objectives: At the end of this presentation, delegates will be able to:

- ① Discuss current impact of mental health issues on our workforces including Alcohol use, abuse and death, Drug overdoses, Suicides, Real estate and Transition anxiety, Labour market shortages and Work-life balance
- ① Describe the elements of trauma, impact on our nervous system and relation to trauma informed care
- ① Identify the components of compassion fatigue, vicarious trauma, burnout and secondary trauma, and what can be done to address markers on a personal and professional level
- ① Construct a trauma-informed organisation and what it means to create a healthy system
- ① Gain self-care tools for your own benefit and growth.

An industry advocate, Jaime Vinck, MC, LPC serves as vice chair of the Board of Directors of the US National Association of Addiction Treatment Providers (NAATP). Jaime, was recruited in June of 2024 to be the president of Meadows Behavioral Healthcare. In this newly created role, she is providing leadership across all Meadows residential and outpatient operations, alumni relations and The Meadows senior fellows. Prior to accepting this opportunity, she was CEO of CPF Recovery Ways. In her role, Jaime provided leadership to the operations in Utah, Washington, Idaho, Nevada and Texas. Jaime was previously part of Acadia Healthcare where she was CEO of The Sierra Tucson Group, which included Southern California programmes and the AZ Campus of Sierra Tucson. While at Sierra Tucson, Jaime was also chief clinical officer/chief operations officer, demonstrating her strength in clinical leadership, programme development and treatment operations. Jaime has been recognised as a mentor to those in leadership positions in the industry. She has been named Licensed Professional Champion Women of Influence Awards sponsored by *Inside Tucson Business* and in 2019 was named as one of Arizona's Most Influential Women by *AZ Business Magazine*. Jaime regularly been named one of the top leaders in Arizona in both healthcare and behavioural health. She speaks nationally and internationally on trending topics, including Suicide, addiction & depression, Suicide and the organisation, Compassion fatigue, and Today's marijuana and the addiction treatment experience.

11.00-11.30AM: REFRESHMENTS IN EXHIBITOR ROOM - THE GRAND FOYER - BESIDE THE PRESENTATION ROOM



Have a coffee/tea and cookies, visit exhibitors to see what they offer, enter free raffles for jewellery, USB storage and more.

11.30AM "BUT HOW DO I SAVE MY MARRIAGE?"

presented by Paula Hall MBACP (Accred), UKCP Reg, COSRT Acc, ATSAC



Many people present for help with addiction when they hit rock bottom and often that's accompanied by relationship breakdown. Whilst as professionals we know the importance of prioritising recovery, we also need ways to empathically and practically address the oft urgent cry of "but how do I save my marriage?"

Learning objectives: At the end of this presentation, delegates will be able to:

- ① Understand the impact of addiction on relationships, particularly sex/porn addiction
- ① Provide clients with psycho-education to help them understand and address relational issues
- ① Give clients a range of pragmatic strategies and techniques for rebuilding trust, without compromising their recovery.

Dr Paula Hall is widely recognised as the UK's leading expert in the field of sex and porn addiction and is author of *Understanding & Treating Sex and Pornography Addiction* (Routledge 2019), *Sex Addiction – The Partners Perspective* (Routledge 2015) and *Sex Addiction – A Guide for Couples* (Routledge 2019) and numerous academic papers. She is also founder of the Laurel Centre which provides therapy for individuals, couples and groups around the UK as well as training for professionals, including the Accredited Diploma in Compulsive Sexual Behaviours and Sex Addiction (CPCAB Level 5). Paula has been a psychotherapist for nearly 30 years, specialising in sex and pornography addiction for 15 of those. She describes her approach as biopsychosocial and sex positive and continues to develop her expertise alongside advances in practice and research.

12.00PM REDUCE INTIMATE PARTNER VIOLENCE USING THE ADVANCE-D PROGRAMME

presented by Professor Gail Gilchrist PhD and Professor Liz Gilchrist MA, MPhil, PhD, HCPC Reg Forensic Psychologist, AF BPS



Substance use is a known risk factor for intimate partner violence (IPV) yet most perpetrator programmes do not address it. Perpetrator programmes reduce abusive behaviour by 30-65%, with one evaluation reporting a social return on investment of £14 for every £1 spent. £66billion is the social and economic costs of intimate partner violence in the UK, £47billion of which is attributable to the physical and emotional harm to victims/ survivors and £19billion of lost economic output and costs to deal with the consequences of IPV including NHS, the criminal justice system and services for victims/survivors - but less than 1% of UK perpetrators are referred to a specialist intervention. Delivering the ADVANCE-D Programme could save money, reduce recidivism and improve outcomes for perpetrators and survivors.

Learning objectives: At the end of this presentation, delegates will be able to:

- ① Summarise the theories of IPV and substance use on which ADVANCE-D is based
- ① Assess risk: profile risk, including considering imminence, level of harm, nature of harm, and risk and safety requirements, as well as suitability for ADVANCE-D
- ① Ascertain theories underpinning the programme, including thinking around how people change, what helps people to change, what the targets of change are/behaviours driven by IPV, managing relationship ending, communication, sexual jealousy - and address these.

Gail Gilchrist is Professor in Addictions Healthcare Research at King's College London. Her research focuses on understanding the relationship between substance use and mental health, intimate partner abuse and blood borne viruses; and developing and testing interventions to address these co-occurring issues. Gail received her PhD in 2004 from the University of Glasgow. Prior to joining King's in 2013, Gail held research posts in the UK (Argyll and Clyde Drug Action Team, Greater Glasgow NHS Board, University of Greenwich), Australia (University of Melbourne) and Spain (Institut Hospital del Mar d'Investigacions Mèdiques, Barcelona). She has published about 100 manuscripts, editorials and reports. Gail is a co-editor of *Advances in Dual Diagnosis* journal and a member of the International Society for Addiction Journal Editors. Research interests: Intimate partner abuse, Comorbidity, People who inject drugs, Gender, Sexual and drug risk behaviours, Interventions.

Liz Gilchrist is a HCPC-Registered forensic psychologist and a chartered psychologist (since May 1998). She is professor of Psychological Therapies at the University of Edinburgh, chair of the Scottish Advisory Panel for Offender Rehabilitation, past-chair of the Division of Forensic Psychology-Scotland and a member of the Community Justice Scotland Academic Advisory Committee. She is the intervention lead for a large NIHR funded study, ADVANCE, exploring the feasibility of delivering an integrated intimate partner abuse and substance use intervention in health settings in the UK and has researched and published in the area of intimate partner abuse, substance use, parenting risk and justice. Liz is also associate fellow of the British Psychological Society and fellow of the Higher Education Academy. She holds a MA (Psychology) (Edin.) MPhil (Criminology) (Cantab.) and a PhD (Criminology) (Cantab.). She served for 13 years as a member of the Parole Boards for Scotland and for England and Wales. She held the roles of research advisor and training provider for the Risk Management Authority in Scotland. And she led a large NIHR funded study on understanding and responding to intimate partner abuse in the context of substance use. She has led training for trainee forensic psychologists for over 20 years. Her main area of expertise is in intimate partner and domestic abuse, and is an accredited trainer for the Spousal Assault Risk Assessment v3. She is trained in general risk assessment and in CBT interventions and working in forensic, mental health and child protection contexts. She is a member of the British Psychological Society Register of Qualifications in Test Use (RQTU) and trained in measures including the assessment of general violence (HCR-20 v3), sexual violence (RSVP), intimate partner violence (SARA v3), young sexual offending (MEGA), victimisation and safety (Danger Assessment), stalking risk (SRP), personality disorder (IPDE), psychopathy, (PCL-R) and collaborative child protection (Safe & Together).

12.30AM SELF-DIAGNOSIS, ECHO CHAMBERS AND MISINFORMATION

presented by Claudia D Schwarz MFT



Self-labeling occurs when community members resonate with shared symptoms, despite not being professionally assessed. Online community members sometimes informally diagnose others or even relatives based on online information, not professional assessments: easy availability means more people rely on social media or online resources instead of seeking medical or mental health professionals. Examine how this affects people seeking help for substance abuse. Explore how social media transformed the way we access information, form opinions and make decisions. Delve into the shift from traditional, centralised sources of information to algorithm-driven, personalised news feeds. Identify how people now curate their own information environments, often reinforcing existing beliefs through echo chambers and filter bubbles. .

Learning objectives: At the end of this presentation, delegates will be able to:

- ① Discuss the role of social media and online communities in shaping perceptions of substance use, trauma and self-diagnosis practices
- ① Identify how echo chambers and algorithm-driven content can reinforce misinformation related to substance use disorders, mental health issues and treatment
- ① Evaluate the potential risks and consequences of self-diagnoses and misinformation on individuals' health behaviours, treatment decisions and stigma..

Please turn page for Claudia Schwarz's bio.



(Continued from previous page) Claudia Schwarz is a Board certified, licensed marriage and family therapist with decades of experience in mental health settings. As well as a successful private practice since 2003, she worked as a therapeutic and educational consultant, and is a clinical member of IECA. She earned her Bachelor's Degree in Clinical Psychology at Willamette University in Oregon, and her Graduate Degree in Marriage and Family Therapy at the California State University. Claudia is committed to helping to strengthen and support people with therapeutic needs and to bridge the gap between therapeutic support professionals. Her established professional relationships include consultants, admissions and outreach teams, leadership teams, educational and family law attorneys, therapists, psychiatrists and physicians. She has additional training and certifications in Cognitive Behavioral and Family Systems specialties, as well as Custody Evaluations, Child Interviews, Child Reunification and Parenting Coordination. As well as being chief clinical development officer for J Flowers Health Institute globally, she has taught continuing education to professionals nationwide and has been seen regularly over the years on both news and radio as an expert on mental health issues.

1-2PM A HOT LUNCH AND SALADS PREPARED BY 5*HOTEL CHEF WILL BE PROVIDED, IN EXHIBITOR AREA, WITH SEATING IN GRAND BALLROOM



Choose your meal, check out exhibitors, enter free raffles, browse through books, sit and chat at ease.

2.00PM REVISITING THE MINNESOTA MODEL - AND DEBUNKING MISCONCEPTIONS OF THE 12 STEPS
presented by Markkus Trew



It's easy to forget that the Minnesota Model represented a social reform movement, playing a major role in transforming treatment wards from abysmal pits into places where alcoholics and addicts could retain their dignity and recover successfully. It incorporates AA's 12-step programme, multidisciplinary teams, group therapy, individualised care, a holistic approach, residential treatment, family involvement and continuing care. The Minnesota Model views addiction as a chronic, progressive disease requiring lifelong management. Its structured yet flexible framework has influenced many treatment programs worldwide, blending professional intervention with peer-driven support.

Learning objectives: At the end of this presentation, delegates will be able to:

- ① Define the 12 steps in layman terms
- ① Explain the link between the 12 steps and its spiritual principles
- ① Discuss if addiction is a disease - and more.

Markkus is Head of Treatment and Counselling at Broadway Lodge and has extensive experience of working in treatment centres. He is responsible for leading the counselling and support team and for developing innovations in the therapeutic programme that draws on evidence-based research and practice. His specialism is attachment theory looking at early parental relationships and early years' impact on child development and addiction. He has a diploma in leadership and management, is a qualified counsellor (holding a higher diploma in counselling) and also has accredited professional registration with the National Counselling Society (NCS). Markkus' previous career is in property – he trained as a surveyor and holds a degree in estates management that enables him to balance his therapeutic knowledge and skills with a commercial acuity. He brings a passionate focus on improving the treatment experience for patients, driving up standards of care and reporting to a high level of quality, alongside making sure the business is run along exemplary lines.

2.30PM BUILD MORE RESILIENT FAMILY SYSTEMS FOR EVERYONE'S LONG-TERM RECOVERY
presented by Jim Holsomback MA, ABT



Family systems tirelessly work to support their loved ones struggling with substance use disorders and the comorbid disorder that often accompany addiction, such as depression, anxiety, self-harm and trauma. While families strive to compassionately help loved ones in need, they often experience and exhibit compassion fatigue and are at high risk for developing trauma and/or PTSD. Explore how providers can assess the family system and needs while teaching strategies that help establish and build a family system's resiliency to be healthier individuals and more resilient caregivers for their loved one in recovery.

2.30PM SUPPORTING FAMILIES IN RECOVERY TO BUILD MORE RESILIENT FAMILY SYSTEMS
presented by Jim Holsomback MA, ABT

Learning objectives: At the end of this presentation, delegates will be able to:

- ① Provide brief review of research around trauma and suicide across geographic and age populations
- ① Show the importance of providing skills and support for family systems to help build resilience for themselves as well as their loved one in recovery
- ① Identify the primary and secondary trauma symptoms and PTSD that family members can exhibit when their loved one struggles with substance use and/or life-threatening behaviors.

Jim Holsomback serves as the director of marketing and clinical outreach for McLean Hospital. He previously served as the director of adolescent clinical education and has extensive experience working with adolescents and families and with psychiatric programmes and hospitals across the US. His leadership role in clinical outreach provides an opportunity to continue working with clinicians to provide awareness and access to services for families, nationally and internationally. Jim has a particular interest in working with adolescent and families that experienced trauma and exhibit trauma-related behaviours that preclude them from accessing their personal, academic, and professional strengths. He finds assisting family systems understand and access evidence-based treatment to help patients and families regain their interests, relationships, and lives is particularly rewarding. He has earned a BA in Psychology, University of Rochester (1994) and MA (ABT) in Child Development, Tufts University (1997).

3.00PM MARKETING YOUR ADDICTION SERVICE: ETHICS
presented by Johan Sorensen



There has emerged a heightened focus on ethical marketing in addiction services, driven by regulatory reforms, industry self-regulation and public scrutiny. While some strides have been made - through laws, certifications and ethical codes - challenges like regulatory gaps, digital marketing risks and profit-driven practices persist. Unlike the US, where laws like the 2018 Support for Patients and Communities Act explicitly ban patient brokering, other countries including the UK lack comprehensive legislation targeting unethical marketing in addiction services. The UK Advertising Authority Standards recently helped fill this gap. Ethical marketing requires transparency, patient-centredness and ongoing commitment to protect vulnerable people seeking recovery as well as their suffering close ones. Providers must carefully navigate these complexities to build trust and ensure access to quality care for people who need it.

Learning objectives: At the end of this presentation, delegates will be able to:

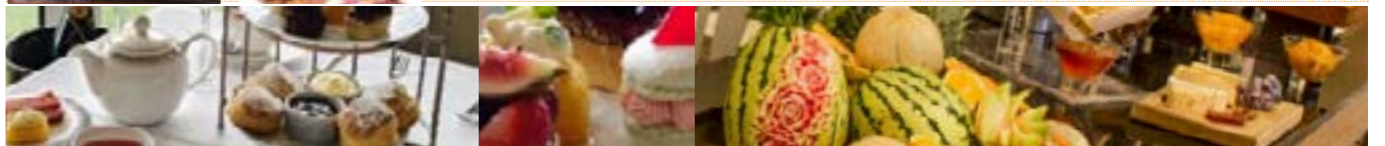
- ① Summarise ongoing challenges to addiction service marketing such as regulatory gaps, patient brokering and fraud, balancing profit and ethics, and influencer and social media risks
- ① Discuss regulatory scrutiny and industry standards, including ASA, LegitScript and Google
- ① Collate digital marketing challenges (SEO, PPC, social media, influencer marketing) and data privacy concerns
- ① List recent industry initiatives.

Johan Sorensen is the founder of Portobello Behavioural Health which provides case management, counselling and behavioural health coaching based in London and Guildford. With over 25 years in the mental health and addiction field, he has extensive experience setting up and managing treatment facilities and programmes across the UK, the Middle East and US. Initially trained as a therapist, Johan has worked in various aspects of service delivery, focusing on personalised solutions for individuals, families and organisations. He founded Portobello Behavioural Health to emphasise tailored care throughout the recovery continuum. Johan holds a BA (Hons) from the University of London (1994-1999) and has served on charitable boards while consulting for media on mental health and addiction topics. His professional expertise includes addiction recovery, interventions, mental health and prevention. His previous roles include positions at Sorensen Consultancy, Onsite Workshops, Music Support, and C4 Recovery Solutions.

3.30-4.00PM: REFRESHMENTS IN EXHIBITOR ROOM - THE GRAND FOYER - BESIDE THE PRESENTATION ROOM



Have a coffee/tea and cookies, visit exhibitors to see what they offer, enter free raffles for jewellery, USB storage and more.





4.00PM THE SCIENCE OF ADDICTION

presented by Tessa Corner MPhil, BSc, PGD



Developments in addiction science, particularly from 2024 and early 2025, reflect a deeper understanding of the neurobiological, genetic and behavioural mechanisms underlying substance use disorders. Neurobiological insights include brain circuitry and dopamine reassessment, epigenetic mechanisms, glial cell involvement and adolescent brain vulnerability. Genetic and predictive advances include risk factors, neural connections and alternative splicing. There are innovative treatment approaches adding to behavioural and cognitive interventions. There are policy and access improvements, albeit slight. And there are emerging challenges such as rising cannabis use, sedative and anxiolytic disorders - and the effect of Covid lockdowns. How does this research affect everyday clinical practice?

Learning objectives: At the end of this presentation, delegates will be able to:

- ① List what is being funded at the moment
- ① Explain the implications for the 'disease concept'
- ① Identify how we can help future research into addiction treatment and recovery.

Tessa Corner is CEO of StreetScene Addiction Recovery, founded in 1989 and comprising Allington House and Cornerways in Bournemouth and Francis House in Southampton. She is Honorary Fellow (Bournemouth University) and earned a MPhil (Faculty of Science & Technology, Bournemouth University), BSc Open (Open University) and Post Graduate Diploma in Managing Voluntary Organisations (Open University). Tessa has 34 years' experience working in addiction, 37 years in recovery. Her research works with Bournemouth University include: Wellbeing in Addiction Recovery: Does It Differ across Addictions?, COPE.er Method: Combating Digital Addiction via Online Peer Support Groups and Enabling Responsible Online Gambling by Real-time Persuasive Technologies.

4.30PM RECOMMENDATIONS FOR EVIDENCE-BASED TREATMENT FOR GAMBLING DISORDER AND THEIR RELEVANCE TO THE RECOVERY PROCESS

presented by Venetia Leonidaki HCPC, BPS, BABPC, BPC



The first Gambling Harms Guidelines in England were published by the National Institute for Health and Care Excellence this year, outlining the type of psychological support needed by those experiencing a gambling disorder and/or gambling harms. Summarise the key points of the NICE Guidelines, focusing on treatment, and explain what CBT for gambling, the main evidence-based treatment, looks like in practice. Draw on material from the book Breaking Free: How to Stop Gambling and refer to other treatment protocols. Discuss limitations of the current literature and the one one-size-fits-all treatment approach, and how recovery from gambling disorder goes beyond formal treatment.

Learning objectives: At the end of this presentation, delegates will be able to:

- ① Summarise the NICE-recommended treatment for gambling disorder and limitations
- ① Describe the forms that these recommendations take in clinical practice
- ① Access relevant clinical resources
- ① Discuss how formal treatment options fit into the process of recovery..

Dr Venetia Leonidaki is a consultant clinical psychologist and psychotherapist with extensive experience in behavioural addiction, complex grief and relational difficulties. She has led the treatment programme at the National Gambling Clinic since 2018. Dr Leonidaki has co-edited the self-help book Breaking Free: How to Stop Gambling, contributing valuable resources to those affected by gambling addiction. Dr Leonidaki has also authored peer-reviewed articles and book chapters focusing on gambling disorder and psychotherapy research. Dr Leonidaki is an accredited supervisor in Cognitive Behavioural Therapy and Dynamic Interpersonal Therapy, and a fully trained couple therapist. Dr Leonidaki is a visiting lecturer on gambling addiction in several university courses across England and a DIT supervisor for the Anna Freud Centre. She is also a Trustee for Footprints Baby Loss.



Dashing delegates and memories of DB Recovery +UKESAD 2024

(click for yearbook)

5.00PM THE SWEET SPOT: SUGAR AND ADDICTION

presented by Lisa Newman



In the world of addiction recovery and behavioural health, there is a longstanding narrative that sugar is a harmless, even helpful, tool in early sobriety. Modern science tells us a different story. Sugar impacts brain function, gut health, hormone regulation, and cognitive vitality - all crucial elements in sustained mental health and addiction recovery. Explore a more informed and embodied approach to addiction recovery. Draw on neuroscience, nutritional psychiatry, polyvagal theory and somatic practices to offer a fresh perspective on the role of sugar in long-term healing. This talk isn't about strict abstinence or diet culture; it's about awareness, choice, and true freedom from substances -whether that's alcohol, drugs, or the silent hold of sugar addiction

Learning objectives: At the end of this presentation, delegates will be able to:

- ① Describe the physiological and psychological impact of sugar on addiction recovery – including its effects on the brain, gut microbiome, hormones and sleep
- ① Identify the link between sugar cravings and nervous system dysregulation – exploring concepts from polyvagal theory, trauma-informed recovery and somatics
- ① List practical strategies for reducing sugar dependency – including nutritional choices, movement, fasting techniques and mindful eating
- ① Examine their own relationship with sugar and its role in their personal and professional lives – developing a deeper awareness of how sugar may be influencing mood, behaviour and wellbeing
- ① Incorporate body-based interventions into addiction recovery support – using movement, breathwork and embodied awareness to regulate cravings and emotions.

Lisa Newman is a certified Life Success Coach and consultant who utilises the science and spirituality of breathwork and somatics for mental health and wellbeing. As director of Recalibrate Recovery Services and a lived-experience advocate, she is an addiction Recovery Coach/ Sober Companion offering personalised detox packages for people struggling with addiction. She is also a qualified yoga teacher, mindfulness meditation practitioner. Lisa won a Winston Churchill Travelling Fellowship award in 2002 which enabled her to travel to India and California to see how "East meets West" in terms of treating those with addiction and mental health issues. She uses this knowledge and experience to deliver powerful courses. Read Lisa's blog: [Heroin or sugar? Which is harder to come off?](#)

7pm MONDAY 30 JUNE 2025 - BY INVITATION ONLY, LIMITED SEATS

DB RECOVERY+ McLEAN DECONSTRUCTING STIGMA AWARDS DINNER 2024

They recognise, celebrate and encourage the lifesaving but under-recognised vocation of dedicated workers and, in so doing, help to remove stigma. The Awards identify and celebrate outstanding addiction treatment/recovery by organisations, individuals and teams. They recognise that high standards of quality and integrity are vital to successful outcomes, as well as rewarding the dedication and vocation of therapists, researchers and others at the cutting-edge of their profession.

Hundreds of entries exemplify the talent, dedication and creativity of individuals and organisations, giving countless reasons to take pride in our field.





Who, what: presenters, topics

A conference/training by people in recovery for people in recovery and anyone affected by addiction: therapists, politicians, psychiatrists, doctors, nurses, healthcare workers, educators, advocates, families. Learn, catch up with friends old + new, hone your skills, earn up to 14 NAADAC CEs /CPDs.

TUESDAY 1 JULY 2025 - GRAND BALLROOM

Delegates can participate in ALL 28 presentations – no difficult choices to limit your speaker/topic choices!
That's 14 intense presentations each day, enjoying the company of ALL your fellow delegates.

ARRIVAL 8.00-9.15AM: REGISTRATION + REFRESHMENTS

Have a coffee/tea and cookies, meet and greet friends old and new and/or join mindfulness and mutual-help meeting.

8.00AM 'OPEN' 12-STEP MEETING (1 hour)

chaired by a long-term member of 12-Step fellowships who is also a qualified therapist



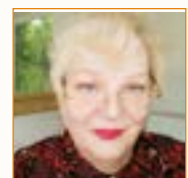
For people in recovery to get a sense of belonging right from the start, and for professionals and carers who want to witness how mutual-help works. Both the World Health Organisation and UK health watchdog NICE recommend mutual-help groups, particularly the 12-step based ones – and delegates will hear of their benefits in key presentations throughout the conference. But how do they work? This confidential but open meeting is for members of 12-step fellowships and for interested professionals who want to learn and experience more of what their clients are doing and feel more confident in recommending and understanding the processes.

Learning objectives: At the end of this meeting, delegates will be able to:

- ① Describe the procedures of a 12-step mutual-aid meeting, its organisation and facilitation
- ① Impart to others how mutual-aid 'fellowship' members share experience, strength and hope
- ① Explain to people in need of help how they can gain and sustain recovery from addictive behaviours through mutual-aid meetings.

9.15AM WELCOME, THANK YOU FOR JOINING US AND HELPING PEOPLE INTO RECOVERY

from Deirdre Boyd, owner of DB Recovery Resources



Recovery from addiction is possible; this symposium demonstrates it in action, and the research behind it.

For three decades, Deirdre Boyd has been a leader in the field of recovery from addiction, with an international reputation: she "inspires the inspirers". Based in the UK, she heads up DB Recovery Resources which supplies a daily news service to the international alcohol/drug-treatment field on addiction recovery, offers an archive of over 38,000 news+research items, publishes Recovery Plus journal, and organises the DB Recovery+ UKESAD international trainings on addiction recovery: the UK's largest event marking the UN's and WHO's World Drug Day. Most recently invited in 2021, by the deputy Prime Minister, to submit addiction treatment/recovery research and evidence, she has spoken at the All Party Parliamentary Drugs Misuse Group, the APPG Alcohol and the APPG on Children and Cannabis, was part of the dti Foresight Project on Brain Science, Addiction & Drugs which predicted drug scenarios for the next 25 years. Deirdre has been quoted in House of Commons and House of Lords debates on alcohol and drugs, and contributed to the Drug Policy 2010 and Select Committees. She authored *Addiction & Recovery: self-help for friends, families and addicts*, which was translated into 7 languages. Deirdre served on the board of the International Certification & Reciprocity Consortium UK & Europe CIC which had 45,000 members at the time. She served on the board of the National Association for Children of Alcoholics (UK) and sat on the Centre for Policy Studies' Addictions committee. Deirdre was voted by the public to receive the Directory of Social Change Influencer Of The Year Award 2012. The International Council on Alcohol & Addictions presented her with the 'Dr Vincent Bakeman Memorial Award for Outstanding Community Services'. She has also received a Sierra Tucson Award for Outstanding Achievement.

9.30AM PRECIPITANTS OF LONG-TERM RELAPSE AND IMPLICATIONS FOR EMPIRICALLY INFORMED DISEASE MANAGEMENT

presented by Professor John F Kelly PhD, ABPP



Much has been theorised and documented about factors involved in addiction relapse during the early weeks and months following a recovery attempt. Because of the importance of initial withdrawal management and metabolic and psychosocial stabilisation in patients' lives, much of addiction care has centred round withdrawal management and addressing the operant and classically conditioned "triggers" (people, places, things, time of day/day of the week) that can precipitate relapse. While critically important, almost nothing is known about the factors involved in longer-term relapse after full sustained remission (ie, at least one year of recovery), despite the fact that stable remission – wherein the risk of meeting criteria for an alcohol or other drug disorder in the following year is no greater than that of the general population - occurs only after about 5 years of continuous remission. Conceivably, precursors would be centred less around classically conditioned cue-reactivity factors - strongly linked to early relapse risk - because much deconditioning and new associative learning would have been in the years since last symptomatic AOD use. Instead, major precipitants are more likely related to lowered cognitive recovery vigilance, avoidant coping or difficulty coping with distress (eg, job loss; divorce; illness, trauma, chronic pain) or eustress (eg, job promotion/move to a new city; new social relations; remission from a chronic illness) as well as changes in recovery-specific health services usage. Greater knowledge of the factors involved in long-term relapse could sensitise and empower clinicians to assess for, monitor and manage such risk factors before disorder recurrence. Hear recent results from a study addressing three primary research questions: 1. What is the nature and timing of change that occurs across major biopsychosocial and health services utilisation elements in the year prior to addiction relapse following full sustained remission; 2. To what degree do people attribute such changes as contributing to their relapse. 3. What the commonly reported single most influential contributors of relapse. Implications for long-term disease management are.

Learning objectives: At the end of this presentation, delegates will be able to:

- ① Describe the major theoretical differences between short-term and long-term relapse precipitants
- ① Name the top three biopsychosocial and health services precipitants involved in long-term relapse
- ① Characterize the nature and timing of the destabilizing factors involved in the year leading up to a long-term relapse.
- ① List two major implications of the findings for long-term disease management.

Dr John F Kelly is the Elizabeth R. Spallin Professor of Psychiatry in the Field of Addiction Medicine at Harvard Medical School – the first endowed professor in addiction medicine at Harvard. He is the founder and director of the Recovery Research Institute at Massachusetts General Hospital and associate director of the Center for Addiction Medicine at MGH. He is also a past president of the American Psychological Association Society of Addiction Psychology, is a Fellow of the APA, and a Diplomate of the American Board of Professional Psychology. He has served as a consultant to US federal agencies such as the White House Office of National Drug Control Policy (ONDCP), the Substance Abuse and Mental Health Services Administration (SAMHSA) and the national Institutes of Health (NIH); to national non-federal treatment institutions, such as the Hazelden Betty Ford Foundation and Caron Foundation; and to foreign governments, the World Health Organization and United Nations. Professor Kelly has won numerous state, national and international distinguished scientist and lifetime achievement awards for his work. He has published over 200 peer-reviewed articles, reviews and chapters in the field of addiction science and is an associate editor for several academic journals in the addiction field. He works with *Psychology Today* as a monthly contributor. His clinical and research work has focused on the addiction treatment and recovery process, including research on: Translation and implementation of evidence-based practices, Reducing stigma associated with addiction, Addiction and criminal justice, Addiction treatment theories and mechanisms of behaviour change. He is a licensed clinical psychologist working with individuals and families with alcohol and other drug use disorders and is a Patient's Choice award recipient.

10.00AM THE CONTINUUM OF CARE: THE RATIONALE AND DESIRE OF WORKING TOGETHER

presented by Recovery Network et al (names tbc)



A continuum of care addresses this by providing a seamless progression of services, from initial assessment to long-term recovery support, adapting to the individual's changing needs. Without a continuum, people usually receive fragmented care, increasing the likelihood of relapse or disengagement. For instance, someone completing detox without follow-up outpatient support can struggle to maintain sobriety in their home environment. By contrast, a continuum ensures ongoing accountability and resources, improving recovery success rates.

Learning objectives: At the end of this presentation, delegates will be able to:

- ① Pinpoint how stages of recovery require different interventions, from detoxification to inpatient/residential treatment, outpatient programmes, soberliving, transitional housing, aftercare/recovery support and more
- ① Determine how individualised care in a continuum allows providers to adjust treatment intensity and type based on progress
- ① Evaluate how continuum of care helps prevent relapse by providing ongoing monitoring, support and resources (including 12-step and other mutual-aid groups) to help people navigate triggers and maintain sobriety
- ① Establish cost-effectiveness by preventing relapse and reducing the need for repeated intensive treatments and re-admissions
- ① Participate in systemic coordination: a well-designed continuum fosters collaboration among providers, ensuring smooth transitions between care levels and reducing dropout rates - and helping to reduce drug deaths and harms.



10.30AM BENEFITS OF PRIVATE SECTOR AND VOLUNTARY SECTOR WORKING WITH ADDICTION TREATMENT IN THE CRIMINAL JUSTICE SECTOR

presented by Mike Trace (tbc)



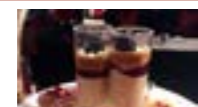
Addiction treatment efforts in prisons/ jails can create significant opportunities for private sector and voluntary sector addiction treatment organisations by fostering collaboration, expanding service delivery, and enhancing outcomes. Learn from the frontline how these efforts can benefit both sectors.

Learning objectives: At the end of this presentation, delegates will be able to:

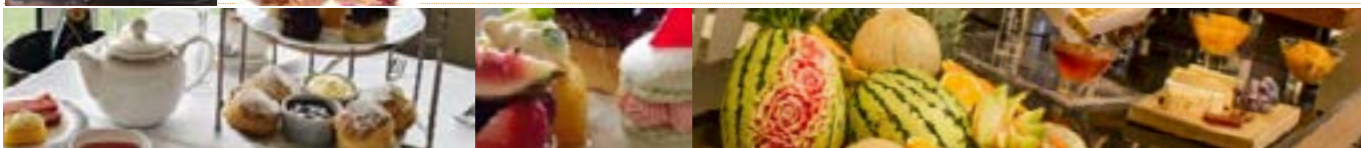
- ① Summarise the benefits for private sector addiction treatment organisations, such as expanded client base and referrals, public-private partnerships, data and outcome improvement and reduced competition for post-release care
- ① Itemise benefits for voluntary sector addiction treatment organisations, including increased reach and impact, funding opportunities, volunteer and community engagement, and advocacy and policy influence
- ① Describe the shared benefits for both sectors, such as reduced recidivism and improved public perception
- ① Discuss the challenges to consider such as resource constraints, stigma and coordination barriers

Mike Trace (to be confirmed as speaker) has been CEO of The Forward Trust since 2004 - the year of the inaugural UKESAD. Some planning meetings for the conference (with Deirdre Boyd) were held in his kitchen in 2003! He was the UK government's Deputy UK Anti-Drug Co-ordinator (drug czar) under Tony Blair. His duties included the creation of the UK's first National Drug Strategy and the oversight of its early years of implementation, a key part of which was the creation the National Treatment Agency. From 2000-2003, Mike was president of the European Monitoring Centre on Drugs and Drug Addiction (EMCDDA) before moving on to become chief of the Demand Reduction section at the United Nations Office on Drugs and Crime. Mike continues to be called on to offer advice to governments and opposition parties, as well as commissions and committees, in the UK and internationally.

11.00-11.30AM: REFRESHMENTS IN EXHIBITOR ROOM - THE GRAND FOYER - BESIDE THE PRESENTATION ROOM



Have a coffee/tea and cookies, visit exhibitors to see what they offer, enter free raffles for jewellery, USB storage and more.



11.30AM SAVING LIVES: THE PRACTICAL POWER OF RECOVERY CAPITAL

presented by Emily Hennessy PhD, author of the new Handbook of Recovery Capital



Dr Hennessy will present the evolving landscape of recovery capital - the internal and external resources that support long-term addiction recovery. With insights from the forthcoming eponymous book, this session will offer clinicians, therapists and peer supporters a fresh, evidence-informed perspective on how recovery capital can be measured, nurtured and applied in practice. Through practical tools and real-world case examples, attendees will leave with new strategies for implementation - and a curiosity to explore recovery capital further.

Learning objectives: At the end of this presentation, delegates will be able to:

- ① Define and differentiate the key components of recovery capital (personal, social, and community) and how they interact to support or hinder sustained recovery
- ① Apply in recovery capital in practice - acquire at least one practical method for assessing and enhancing recovery capital that can be used in clinical or peer support settings within days
- ① Engage clients in growth - introduce the concept of recovery capital to clients in empowering ways, fostering hope, agency, and long-term engagement.

Emily A Hennessy is associate director of the Recovery Research Institute, director of Biostatistics at RRI and assistant Professor at Harvard Medical School. She serves as Associate Methods Editor for the International Coordinating Group of the Campbell Collaboration and is on the editorial board of Psychological Bulletin. She is co-author with David Best of the new Handbook of Recovery Capital, published in April 2025. She was a Fulbright Scholar to Norway where she completed a MPhil in Health Promotion and focused on adolescent well-being. She completed her PhD in Community Research and Action at Vanderbilt University and her postdoctoral fellowship at the University of Connecticut in the Systematic Health Action Research Program (SHARP) Lab. Emily's research examines factors associated with health behavior change among adolescents. Her primary area of research, adolescent substance use disorder prevention, treatment and recovery, is funded by a career development award (K01) from the National Institute on Alcohol Abuse and Alcoholism. This study examines social network and recovery capital mechanisms of the recovery process in adolescents using social identity mapping. A secondary area of her research is in conducting evidence syntheses and in improving methods for evidence synthesis.

12.00PM HOW TO MARKET YOUR ADDICTION SERVICE EFFECTIVELY

presented by Daniel Gerrard



Daniel Gerrard has built UKAT into the the UK's largest residential treatment provider for behavioural conditions, operating 8 addiction treatment centres with 200 beds. How does he keep them full? What innovations must be made in these changing times, regulations and attitudes?

Learning objectives: At the end of this presentation, delegates will be able to:

- ① Narrate a history of addiction marketing over the past 20 years
- ① Identify successes and pitfalls, what to do and what to avoid
- ① Discover new online resources and draw up your own strategy.

Daniel Gerrard is CEO of UKAT, the UK Addiction Treatment group. In 2009, he founded an online addiction treatment service then, in 2012, co-founded UKAT. He successfully led a huge growth expansion: UKAT is now the UK's largest residential treatment provider for behavioural conditions, operating 8 addiction treatment centres with 200 beds spanning the UK. In 2017/18, he led a sales process of the majority of shares in UKAT to a US corporation and again in 2024 to Sullivan Street Partners, where he remains a shareholder and the group's CEO. Daniel also invests in various opportunities through Gerrard Capital (Gcap). Previously, he had 15 successful years working as a derivatives trader for various organisations and continues to trade/invest. He also spent 8 years founding and running online digital media ventures.

12.30PM CHILDHOOD RELATIONAL TRAUMA: UNCOVER THE CORE BELIEFS OF ADDICTIVE PROCESSES AND PATTERNS

presented by Anita Chellamah-Nurse



Police anx influenced/contributed to this work.

Learning objectives: At the end of this presentation, delegates will be able to:

- ① Overview the Integrative approach and see how elements of Post Induction Therapy, DBT, Person Centred and 12 Step Recovery can work together but still honour the individuality of each client
- ① Describe how Post Induction Therapy and DBT can work effectively together to help clients emotionally self regulate by identifying and managing their triggers
- ① Adapt this to where the client is on their recovery journey by differing depths of exploration either in a one to one or group environment, moving at a pace that feels safe and collaborative.ture..

Anita Chellamah-Nurse is an accredited addiction trauma DBT counsellor. Her career started in the 1970s in the Trail Blazing Black musical Bubbling Brown Sugar in London's West End, then in the 1980s received a Gold record in Girl Band Toto Coelo, danced on Top of The Pops in the dance group Legs and Co, co wrote and was lead singer with The Cherry Bombz, voted 10th best female vocalist 1986, and was one of the first presenters for Sky Channel (and of colour), also acting in the last episode of One foot in the Grave and Playing Tina Modotti in BBC short film about Tina Modotti's life. Anita reached her own rock bottom with alcohol and drugs and got clean and sober in 1988 and her life and career changed. She qualified as a counsellor in 1998 from Roehampton Institute in Humanistic Counselling and specialises in Addiction and Childhood Trauma. She believes that addressing both can empower people to live a life free of being a slave to addictive patterns and processes such as love addiction and learn how to have healthy relationships with self and others and live a life with purpose. Anita has worked in 11 treatment centres - residential and day programmes with addicts and families affected by addiction. She was DBT lead at Sanctuary Lodge (flagship of UK Addiction Treatment), as well as now delivering addiction and DBT therapy for its new London Clinic. Anita was trauma lead at The Priory for 18 months and delivered trauma workshops while also working on the addiction programme. She is qualified in on stage 1 and advanced post-induction therapy and is now referred clients to prepare and support after trauma programmes. She also delivers 5-day Trauma Programmes and Supervision for therapists delivering trauma programmes, as well as being referred clients from addiction programmes. Earlier, Anita was part of a pilot government scheme called Wise up in the 1990s, going into schools for young people affected by addiction. She was therapeutic lead at a domestic violence charity and ran drama workshops for people affected by HIV and AIDS at The London Lighthouse. "I feel so grateful to be living a clean and sober life and know I am perfectly imperfect and to be able to accept life as it is not how I want it to be and not drink and use and have the support of my amazing family and friends: PRICELESS!"

1-2PM A HOT LUNCH AND SALADS PREPARED BY 5*HOTEL CHEF WILL BE PROVIDED, IN EXHIBITOR AREA, WITH SEATING IN GRAND BALLROOM



Choose your meal, check out exhibitors, enter free raffles, browse through books, sit and chat at ease.



2.00PM IMPLEMENT EVIDENCE-BASED ADDICTION TREATMENT IN A CULTURALLY SENSITIVE SETTING

presented by *Obi Unaka BSc (Hons), MCMI, APMAP, ACRPS, SACC and Martin Peters Dip HE, Dip RN, CSAT III, ACRPS, AACCC*



The Indian addiction treatment market is strategically important due to its high growth rate and massive unmet need. With 1.4 billion people and rising addiction rates, India is a significant opportunity for healthcare providers and global players entering via telehealth or MAT. It is valued at about US\$407.54 million in 2023 and is projected to at least double that by 2032. Growth is driven by rising substance abuse (60 million alcohol addicts, 31 million cannabis users), increasing awareness, and government initiatives like the "Drug-Free India" campaign and a national helpline. However, only 1 in 20 drug addicts receives hospital-based treatment, indicating significant underdevelopment and untapped potential. Explore the integration of evidence-based addiction treatment approaches in the unique cultural, religious, and socio-economic contexts of India. Examine how best practices in addiction care can be adapted to align with the traditional values and familial structures, prevalent in Indian society.

Learning objectives: *At the end of this presentation, delegates will be able to:*

- ① Identify the key cultural, familial, and societal factors that influence addiction and facilitate recovery in the Indian context
- ① Describe the impact of stigma, religion and gender roles on treatment accessibility and client engagement in India
- ① Discuss strategies for implementing and overcoming some of the culturally sensitive challenges.

Obi Unaka has been working in the field of mental health and addiction treatment for over two decades. He is a qualified and experienced psychotherapist, addictions therapist, clinical supervisor, trainer and treatment consultant. Obi holds a First-Class honours degree from the University of Bath UK, a Certificate in Clinical Supervision from the Centre for Supervision & Team Development UK, and a Level 5 Certificate in Management and Leadership from the Chartered Management Institute, UK. He has held strategic and operational positions as head of service for a community rehabilitation program in Essex and treatment director for a private residential treatment programme in Northamptonshire, both in the UK. Obi has experience of developing and managing treatment programs in residential, community and criminal justice settings. He currently works as the director of residential services at Samarpan Rehabilitation Centre in India.

Martin Peters is a registered nurse and Certified substance abuse therapist with also a diploma in Cognitive Behaviour Therapy. Martin has been working in the mental health field since 1991 in a variety of settings including acute admissions, crisis resolution, forensic, addiction and prison settings in the UK. Since 2005, Martin has worked in Asia, and is seen as one of the pioneers of international rehabilitation in South East Asia, latterly being instrumental in founding and operating the largest private rehab group in South East Asia pre covid. Martin is an experienced focal therapist, and group facilitator and enjoys working with clients from diverse backgrounds, from A-Listers, international sports people, high profile and high net worth individuals, to clients in the criminal justice system. Working from a client centred approach and integrating CBT, Relapse Prevention and 12 Step Facilitation, Martin believes that collaborative work with client and family provide a solid continuum of care. Martin brings a wealth of experience in his role of chief operations officer at Samarpan Rehabilitation Centre in India.

2.30PM EMBODIED COUNTERTRANSFERENCE

presented by *Sarah Buchanan MA, MBACP*



Embodied countertransference, where a therapist experiences physical or somatic reactions in response to a client's emotions or experiences, offers several benefits in psychotherapy: enhanced emotional insight, improved empathy, access to nonverbal material, therapeutic processing and greater self-awareness for therapists. It encourages therapists to monitor their own bodily responses, enhancing self-regulation and preventing burnout or over-identification. By integrating these somatic cues thoughtfully, therapists can enrich the therapeutic process, provided they reflect on and manage these responses to avoid projection or misinterpretation.

Learning objectives: *At the end of this presentation, delegates will be able to:*

- ① Recognise how embodied countertransference responses can serve as valuable clinical data in the therapeutic encounter, particularly when working with complex trauma in recovery
- ① Differentiate between embodied countertransference and empathic resonance, with attention to unconscious communication within the therapeutic field.
- ① Apply embodied awareness techniques to enhance attunement, co-regulation and ethical responsiveness in clinical work with recovering clients.

Sarah Buchanan earned a Masters Degree in Integrative Psychotherapy (MA) and a Degree/Diploma from University of Roehampton in Psychology (BA) Therapeutic Psychology. She holds membership with British Association for Counselling & Psychotherapy. She has over 15 years of experience bringing an extensive working knowledge of 12-step recovery to a clinical practice grounded in contemporary psychodynamic theory, whole-body awareness, and trauma-informed approaches. Her work explores the intersections of psyche, nervous system, and lived experience—particularly through the lens of women's subjectivity. SJ specialises in embodied countertransference and the role of the therapist's body as an instrument of attunement, insight and transformation. She works exclusively face-to-face with women in her London-based practice. She specialises in embodied countertransference, exploring how the therapist's bodily responses deepen therapeutic understanding. Her approach integrates trauma-sensitive yoga, polyvagal theory and a focus on how emotions manifest in the body, fostering real-time connection and insight in the therapeutic relationship. With a background in addiction recovery and work in a local hospice supporting those affected by terminal illness and bereavement, she brings depth and empathy.

3.00PM ADDICTION IN THE WORKPLACE: IDENTIFY WHAT EMPLOYERS WANT

presented by *Triangle HR (tbc)*



Addiction treatment providers need to understand employers' priorities and constraints to effectively support workplace addiction issues. They are familiar with how to help people recover from addictive behaviours and sustain recovery - but too often do not know what part of this is valuable to a company with which they would like to do business while helping its employees. This is a win:win:win for addiction professionals, the employers and the employees. Hear from a human resources company with on-the-ground knowledge and years of experience successfully dealing with such companies.

Learning objectives: *At the end of this presentation, delegates will be able to:*

- ① Identify what employers want, such as Discreet and confidential interventions, Minimised disruption to productivity, Clear return-to-work plans, Education and training for leadership, Cost-effective and measurable solutions, Compliance with workplace policies and legal standards, Proactive prevention and wellness programs and Partnership and communication
- ① Strategise how providers can deliver by (a) developing employer-specific packages that outline services, costs and outcomes, (b) providing data-driven insights (eg, 70% of employees with substance use disorders maintain employment with proper support, (c) partnering with HR to integrate treatment into existing EAPs or benefits packages and offering post-treatment follow-up to ensure long-term recovery and workplace stability.
- ① Discuss how to align services with these employer priorities - privacy, productivity, compliance, prevention - to build trust and deliver impactful solutions for managing addiction in the workplace.

3.30PM THE RIGHT TO HEALTH: PEOPLE WITH EATING DISORDERS ARE BEING FAILED

presented by *Tracy Blackmore MBACP*



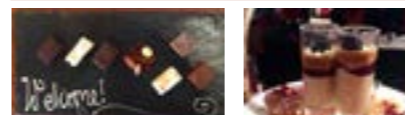
The All-Party Parliamentary Group on Eating Disorders has published several reports addressing critical issues surrounding eating disorder services, research and funding in the UK. The most recent and prominent report, [The Right to Health: People with Eating Disorders are Being Failed](#), was released last January. It addresses the escalating crisis in eating disorder services, highlighting systemic failures, inadequate care and an "alarming rise" in eating disorder cases. The report calls for a national strategy to tackle the crisis, noting that eating disorders accounted for over 31,000 NHS admissions in 2023-24, a significant increase from 19,000 pre-pandemic. Against this backdrop, get up to date on key developments in the treatment of eating disorders - and how you might influence these.

Learning objectives: *At the end of this presentation, delegates will be able to:*

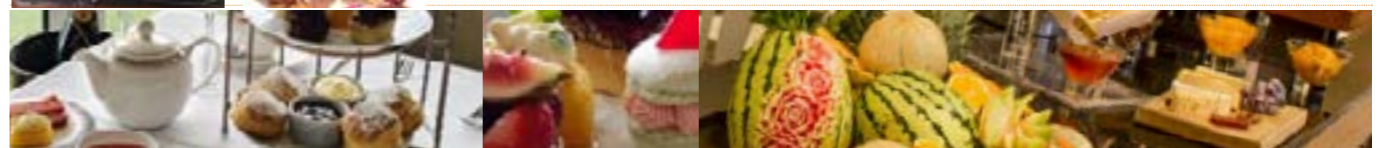
- ① Describe what treatment of eating disorders is about - including its role in a residential setting
- ① Verify key developments in the eating disorders treatment field: worsening services and systemic neglect, "alarming" discharge practices, rising prevalence and misconceptions, impact of Covid-19 lockdowns
- ① Discuss why and how the current system fails so many
- ① Join a call to action: what can we as collective professionals can do to change the unhelpful current landscape?

Tracy Blackmore is an experienced and compassionate counsellor and psychotherapist, accredited with the British Association for Counselling and Psychotherapy (MBACP), specialising in Addiction, Eating Disorders and the concurrent treatment of psychological trauma. With a deep commitment to supporting individuals through life's challenges, Tracy provides a safe and informed space for clients to explore their emotions, navigate personal growth, and achieve greater well-being. Drawing on a trauma informed and person-centered approach, Tracy tailors her therapeutic practice to meet the unique needs of each client, integrating techniques from various modalities to foster meaningful change. She works with adults facing a range of issues, including anxiety, depression, relationship difficulties, grief, and self-esteem challenges. Tracy's empathetic and collaborative style empowers clients to gain insight, build resilience, and move toward a more fulfilling life. Tracy holds a HND in therapeutic counselling, qualifications from The National Centre for Eating Disorders, is a qualified EMDR clinician and adheres to the BACP's and EMDRIA ethical frameworks, ensuring the highest standards of professionalism and confidentiality. She has also been treatment lead at a residential treatment provider, and trained other professionals.

3.30-4.00PM: REFRESHMENTS IN EXHIBITOR ROOM - THE GRAND FOYER - BESIDE THE PRESENTATION ROOM



Have a coffee/tea and cookies, visit exhibitors to see what they offer, enter free raffles for jewellery, USB storage and more.





4.30PM PROFESSIONALS: BENEFIT FROM INTERNATIONAL ACCREDITATION

presented by Steve Valle ScD, MBA (tbc)



Are you an addiction therapist who moves from country to country or wants to be able to do so? Are you a therapist who helps clients online from a variety of countries and wants the credentials to evidence your competencies? Do you want formal globally-recognised certification if you are from a country that does not otherwise recognise addiction therapists? Or do you just want gold-standard universally-recognised certification? Do you want benefits to match your needs as an addiction professional? NAADAC, the Association for Addiction Professionals, has the solution!

Learning objectives: At the end of this presentation, delegates will be able to:

- ① Discuss the benefits and reach of international NAADAC membership and access NCC AP tests or credentials, accepted in over 44 states and 60 countries
- ① Join the NAADAC online community through NAADAC membership and reach around the world for resources
- ① Gain access to over 380 free CE hours of addiction-specific education online on demand and 24x7
- ① Expand your portfolio of skills and quality therapy standards to benefit your clients and yourself
- ① Start the application process to join NAADAC's 85,000 constituents, including over 13,000 addiction professionals around the world..

Stephen K Valle ScD, MBA (tbc), is a recognised leader and international expert in the addiction, criminal justice, and mental health fields. In 1993, he was nominated by Senator Harold E Hughes to serve as director of the Federal Substance Abuse and Mental Health Services Administration (SAMHSA) in the Clinton administration. In 2010, he was invited to address Parliament's House of Lords All-Party Parliamentary Group on Drug Misuse regarding prison reform and addiction issues in the UK and the US. He is a recipient of the NAADAC's prestigious Mel Shulsted award. Dr Valle is also the founder of Accountability Training, a behaviour change model for offenders with addiction. In 1996, he converted his former home in Massachusetts, into a sober residence and founded Grace House. Grace House was the first Oxford House for men and women without a home and recently released offenders with addiction and co-occurring problems in the state. The conceptual framework of his Accountability Training model grew out of his unique connection with the residents of Grace House and with other offenders in the many programmes he established throughout the US. A licensed psychologist and licensed alcohol and drug abuse counsellor, Dr. Valle was president and CEO of AdCare Criminal Justices Services, an affiliate of AdCare Hospital, in MA for 25 years. He is currently chairman of Valle Management Associates Inc, an international addictions and behavioural health consulting company. He is the author of over a dozen journal articles and of *Alcoholism Counseling: Issues for an Emerging Profession*, and was the editor of *Drunk Driving in America: Strategies and Approaches to Treatment* and an associate editor of *Alcoholism Treatment Quarterly*.

5.00PM TRAUMA-INFORMED CARE AND ITS INTEGRATION WITH ADDICTION TREATMENT

presented by (tbc)



Trauma-informed care emphasises creating a safe, supportive and empowering environment to promote healing and recovery. In the context of addiction treatment, TIC is critical because trauma and addiction are deeply interconnected: studies suggest 70-90% of people with SUD have experienced trauma, such as childhood abuse, neglect or interpersonal violence, which often contributes to substance use as a coping mechanism. Integrating TIC into addiction treatment involves adapting clinical practices, programme design and organisational culture to address trauma's role in substance use while avoiding re-traumatisation. Trauma-informed care reflects the field's shift toward understanding addiction as a multifaceted issue rooted in emotional and psychological pain.

Learning objectives: At the end of this presentation, delegates will be able to:

- ① Share with others the key principles of trauma-informed care: Safety, Trustworthiness and transparency, Peer support, Collaboration and mutuality, Empowerment, voice and choice
- ① Explain its integration with addiction treatment, including Screening and assessment, Trauma-specific interventions, Holistic and person-centred approaches, Environmental and relational adjustments, Staff training and organisational commitment
- ① List challenges and considerations such as resource intensity, client readiness and cultural competence.

Delegates who complete and return Evaluation forms provided will be awarded internationally recognised 'gold standard' CEs / CPDs from NAADAC, the Association for Addiction Professionals.

Thank you for joining us

WHAT BENEFITS CAN YOU GAIN BY JOINING NAADAC?

EDUCATION

Over 360 hours of FREE CEs (worth over \$4,500) available online and on demand.

Reduced rates for NAADAC conferences, public policy events, NAADAC regional meetings, and workshops.

Discounted rates on eight NAADAC independent study courses, including the U.S. DOT SAP Qualification & Requalification course.

Reduced rates for all NAADAC publications.

PROFESSIONAL IDENTITY

A professional identity and association that helps preserve and honor the unique talents of addiction professionals.

Networking opportunities through national and state conferences and workshops.

A nationally recognized and newly updated Code of Ethics to promote professional ethics.

Dues that include membership in NAADAC and your state affiliate.

PROFESSIONAL SERVICES

Reduced rates for malpractice and liability insurance for individuals, agencies, peer recovery support specialists, and students through APA, Inc.

Free first-time listing in Psychology Today's Therapy Directory for six months (\$180 value).

Discounted access to the Clocktree telehealth platform and other telehealth support.

Access to NAADAC's Online Community.

ADVOCACY

An influential and effective voice for addiction professionals before Congress and the federal administration.

Advocacy at the national level that affects your funding and policy at the state level.

Support from a D.C.-based government relations firm on national legislation for funding for treatment and recovery support, education and tuition/loan forgiveness, workforce initiatives and national credentialing.



www.naadac.org

Join NAADAC online at www.naadac.org/join or by calling 703.741.7686!

Be a part of the NAADAC community!

www.facebook.com/NAADAC

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www.linkedin.com/company/naadac-the-association-for-addiction-professionals



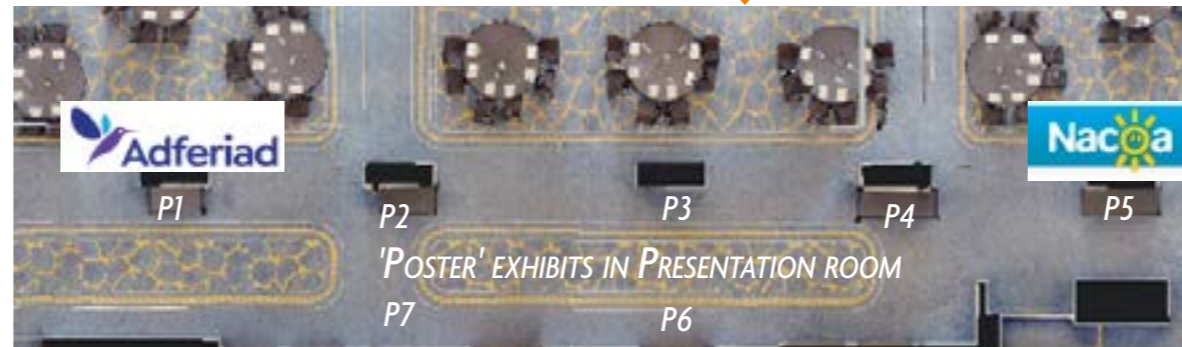
Guide to exhibitors Chelsea Harbour Hotel London SW10

Click logos to see exhibitor services

Click: virtual tour



Everything on one floor:
♥ presentations,
♥ exhibitors,
♥ refreshments, lunch,
♥ loos,
♥ seating areas -
♥ and views.



Key to symbols

- 9' SITE FOR EXHIBITOR POPUP STAND & TABLE:
- 6' EXHIBITOR TABLE:
- CHAIRS:

Click: virtual tour

NOTES
NB: Ceiling height is 2.34m.
If exhibitors prefer, there is the option of (8) smaller 1.2m tables and round 'cocktail' tables.
NO chairs against walls; they are tucked into tables from the front or sides.



Memories...



DB Recovery+ McLean Deconstructing Stigma Awards



The McLean-DB Recovery+ Awards are the 'Oscars' celebrating 'stars' in the field of recovery from addictive behaviours. They recognise, celebrate and encourage the lifesaving but underrecognised vocation of dedicated workers and thus help remove stigma. The Awards identify and celebrate outstanding addiction treatment/recovery by organisations, individuals and teams. They recognise that high standards of quality and integrity are vital to successful outcomes, as well as rewarding the dedication and vocation of therapists, researchers and others at the cutting-edge of their profession. This 3rd year again attracted outstandingly high-quality nominations that exemplify the talent, dedication and innovation of individuals and organisations across all aspects of recovery life, showing us countless reasons to take pride in our field. [Click for info.](#)



Jim Holsomback of McLean Hospital which generously sponsored the Recovery Awards Ceremony and Dinner

Dan Carden MP receives his award from co-hosts **Jim Holsomback** and **Deirdre Boyd**



The view at the end of the night



And the winners were:

- LIFETIME ACHIEVEMENT ~ DOCTOR**
Professor Sir Ian Gilmore
- POLITICIAN OF THE YEAR**
Dan Carden MP
- RESEARCHER OF THE YEAR**
Emily Alden Hennessy
- THERAPIST OF THE YEAR**
Paula Hall
- GRASSROOTS ACTIVISTS OF THE YEAR**
Dot Smith for her work with recovery colleges
Annemarie Ward for the Right to Recovery Bill
- JOURNALIST OF THE YEAR**
Dr David McCartney

