



## Social Work 617

### Substance Abuse with Consideration of Other Addictive Disorders

\*Please note: this course is currently being revised. There may be some changes to this syllabus. The final syllabus will be posted on the course wall by the first day of class.

**3 Units**  
*Summer 2014*

<b>Instructor:</b>	Victoria Winsett MSW, LCSW, SUDC	<b>Course Day:</b>	Thursdays
<b>E-Mail:</b>	Winsett@usc.edu	<b>Course Time:</b>	4:45-6:00 or 6:30-7:45
<b>Telephone:</b>	801-661-2794	<b>Course Location:</b>	Online
<b>Office Hours:</b>	By appointment		

#### I. COURSE PREREQUISITES

None

#### II. CATALOGUE DESCRIPTION

Exploration of nature and treatment of substance abuse and other addictive disorders as well as relevant treatment models for individuals, groups and families.

#### III. COURSE DESCRIPTION

Substance Dependence and Abuse is a widespread problem in all cultures, especially in the United States. It does not discriminate. Our understandings of substance use, dependence, abuse, and treatment are some of the most rapidly evolving and also controversial areas of knowledge in the mental health and medical fields. This course is designed to cover the key content necessary for developing a comprehensive understanding of a complex body of knowledge that is filled with certainties and uncertainties, science and speculation, dogma and theory, as well as opinion and silence. It will also provide students with a reflective grasp of a confusing body of knowledge. Topics covered include ethnocultural influences in addiction, sociocultural aspects of addiction, definitions of addiction, profiles in addiction, substances of addiction, models of treatment, family work, group support and self-medication theories of addiction.

This course also introduces the reader to an integrative model of treatment that infuses Stephanie Brown's stage-driven approach to recovery with a psychoanalytic sensibility. Addiction treatment is deepened when a non-directive, reflective, analytic perspective is coupled with the more traditional and sometimes confrontational approaches of recovery treatment. The combination of these clinical styles prevents relapse.

Chemical dependency touches us all. This course is designed to have a personal, professional, educational and clinical impact. Serious content is delivered with discipline and rigor, creativity and imagination, brevity as well as elaboration. Hopefully students will develop a novel appreciation for a human desire that pleasures, confounds and destroys.

#### IV. COURSE OBJECTIVES

The Substance Abuse with Consideration of Other Addictive Disorders course (SOWK 617) will:

Objective #	Objectives
1	Provide an overview of some of the key core components of the ever expanding field of substance dependence and abuse. Students will be encouraged to develop a comprehensive grasp of a complex body of knowledge that will serve as a foundational understanding for their future professional development. Students are also invited to explore their own emotional relationships with substances as a part of their learning process this semester.
2	Present basic building blocks for a substance dependence and abuse knowledge base. Students will explore the role of ethnocultural and societal influences, definitions in the field, the psychoactive substances, process addictions, the power of group support, the necessity of family involvement and models of treatment.
3	Propose expansive considerations for clinical diagnosis in this field. Students will be encouraged to develop both analytic and creative thinking during the assessment process with consideration of special population needs.
4	Provide theoretical material needed for students to consider and comprehend the psychological suffering behind the self-medicating practices of addiction. Students will have the opportunity to apply these theories to assessment and treatment.
5	Present theoretical and clinical material that will encourage students to develop both the understanding and skills necessary for addiction treatment including prevention of relapse. An integrative treatment model will be presented. Four stages of treatment will be explored. Clinical case studies will be discussed in detail throughout the semester. Emphasis will be placed on the importance of combining psychoanalytic concepts, theories and styles with traditional addiction treatment approaches.

#### V. COURSE FORMAT / INSTRUCTIONAL METHODS

The format of the course will consist of didactic instruction, expert presentations and class discussion. Case vignettes, videos, field excursions, small group exercises and role plays will also be used to facilitate student learning. As class discussion is an integral part of the learning process, students are expected to come to class ready to discuss required reading and its application to theory and practice. Personal investment in individual and professional growth is strongly emphasized and encouraged. Confidentiality of material shared in class will be maintained.

#### VI. STUDENT LEARNING OUTCOMES

Student learning for this course relates to one or more of the following ten social work core competencies:

Social Work Core Competencies	SOWK 617	Course Objective
1 Professional Identity		
2 Ethical Practice	*	3, 4, & 5
3 Critical Thinking	*	1-5
4 Diversity in Practice	*	1-5
5 Human Rights & Justice		
6 Research Based Practice	*	2
7 Human Behavior	*	3, 4, & 5

8	<b>Policy Practice</b>		
9	<b>Practice Contexts</b>		
10	<b>Engage, Assess, Intervene, Evaluate</b>	*	<b>3, 4, &amp; 5</b>

\* Highlighted in this course

The following table explains the highlighted competencies for this course, the related student learning outcomes, and the method of assessment.

Competencies/ Knowledge, Values, Skills	Student Learning Outcomes	Method of Assessment
<p><b>Ethical Practice</b>—Apply social work ethical principles to guide professional practice.</p> <p>Social workers competent in Ethical Practice:</p> <ul style="list-style-type: none"> <li>▪ Fulfill their obligation to conduct themselves ethically and to engage in ethical decision-making.</li> <li>▪ Are knowledgeable about the value base of the profession, its ethical standards, and relevant law.</li> </ul>	1. Recognize and manage personal values in a way that allows professional values to guide practice.	<p>Group Support Reaction Paper (Assignment 1)</p> <p>In-Class Assessment (Assignment 2)</p> <p>Case Study Discussions during Class Participation</p>
	2. Make ethical decisions by applying standards of the National Association of Social Workers Code of Ethics.	
	3. Tolerate ambiguity in resolving ethical conflicts.	
	4. Apply strategies of ethical reasoning to arrive at principled decisions.	
<p><b>Critical Thinking</b>—Apply critical thinking to inform and communicate professional judgments.</p> <p>Social workers competent in Critical Thinking:</p> <ul style="list-style-type: none"> <li>▪ Are knowledgeable about the principles of logic, scientific inquiry, and reasoned discernment.</li> <li>▪ Use critical thinking augmented by creativity and curiosity.</li> <li>▪ Understand that critical thinking also requires the synthesis and communication of relevant information.</li> </ul>	5. Distinguish, appraise, and integrate multiple sources of knowledge, including research-based knowledge, and practice wisdom.	<p>Group Support Reaction Paper (Assignment 1)</p> <p>In-Class Assessment (Assignment 2)</p> <p>Weekly Class Participation</p>
	6. Analyze models of assessment, prevention, intervention, and evaluation.	
	7. Demonstrate effective oral and written communication in working with individuals, families, groups, organizations, communities, and colleagues.	

<p><b>Diversity in Practice</b>—Engage diversity and difference in practice.</p> <p>Social workers competent in Diversity in Practice:</p> <ul style="list-style-type: none"> <li>Understand how diversity characterizes and shapes the human experience and is critical to the formation of identity.</li> <li>Recognize that the dimensions of diversity reflect intersectionality of multiple factors including age, class, color, culture, disability, ethnicity, gender, gender identity and expression, immigration status, political ideology, race, religion, sex, and sexual orientation.</li> <li>Appreciate that, as a consequence of difference, a person's life experiences may include oppression, poverty, marginalization, and alienation as well as privilege, power, and acclaim.</li> </ul>	8. Recognize the extent to which a culture's structures and values may oppress, marginalize, alienate, or create or enhance privilege and power.	<p>Group Support Reaction Paper (Assignment 1)</p> <p>In-Class Assessment (Assignment 2)</p> <p>Weekly Class Participation</p>
	9. Gain sufficient self-awareness to eliminate the influence of personal biases and values in working with diverse groups.	
	10. Recognize and communicate understanding of the importance of difference in shaping life experiences.	
	11. View themselves as learners and engage those with whom they work as informants.	

<p><b>Research Based Practice</b>—Engage in research-informed practice and practice-informed research.</p> <p>Social workers competent in Research Based Practice:</p> <ul style="list-style-type: none"> <li>Use practice experience to inform research, employ evidence-based interventions, evaluate their own practice, and use research findings to improve practice, policy, and social service delivery.</li> <li>Comprehend quantitative and qualitative research and understand scientific and ethical approaches to building knowledge.</li> </ul>	12. Use practice experience to inform scientific inquiry.	<p>Group Support Reaction Paper (Assignment 1)</p>
	13. Use research evidence to inform practice.	

<p><b>Human Behavior</b>—Apply knowledge of human behavior and the social environment.</p> <p>Social workers competent in Human Behavior:</p> <ul style="list-style-type: none"> <li>Are knowledgeable about human behavior across the life course; the range of social systems in which people live; and the ways social systems promote or deter people in maintaining or achieving health and well-being.</li> <li>Apply theories and knowledge from the liberal arts to understand biological, social, cultural, psychological, and spiritual development.</li> </ul>	14. Utilize conceptual frameworks to guide the processes of assessment, intervention, and evaluation.	<p>Group Support Reaction Paper (Assignment 1)</p> <p>In-Class Assessment (Assignment 2)</p> <p>Case Study Discussions during Class Participation</p>
	15. Critique and apply knowledge to understand person and environment.	

<p><b>Engage, Assess, Intervene, Evaluate</b>—Engage, assess, intervene, and evaluate with individuals, families, groups, organizations and communities.</p> <p>Social workers competent in the dynamic and interactive processes of Engagement, Assessment, Intervention, and Evaluation apply the following knowledge and skills to practice with individuals, families, groups, organizations, and communities.</p> <ul style="list-style-type: none"> <li>Identifying, analyzing, and implementing evidence-based interventions designed to achieve client goals</li> <li>Using research and technological advances</li> <li>Evaluating program outcomes and practice effectiveness</li> <li>Developing, analyzing, advocating, and providing leadership for policies and services</li> <li>Promoting social and economic justice</li> </ul>	<p>16. Engagement:</p> <p>Substantively and affectively prepare for action with individuals, families, groups, organizations, and communities.</p> <p>Use empathy and other interpersonal skills.</p> <p>Develop a mutually agreed-on focus of work and desired outcomes.</p>	<p>Group Support Reaction Paper (Assignment 1)</p> <p>In-Class Assessment (Assignment 2)</p> <p>Case Study Discussions during Class Participation</p>
	<p>17. Assessment:</p> <p>Collect, organize, and interpret client data.</p> <p>Assess client strengths and limitations.</p> <p>Develop mutually agreed-on intervention goals and objectives.</p> <p>Select appropriate intervention strategies.</p>	
	<p>18. Intervention:</p> <p>Initiate actions to achieve organizational goals.</p> <p>Implement prevention interventions that enhance client capacities.</p> <p>Help clients resolve problems.</p> <p>Negotiate, mediate, and advocate for clients.</p> <p>Facilitate transitions and endings.</p>	
	<p>19. Evaluation: Critically analyze, monitor, and evaluate interventions.</p>	

**VII. COURSE ASSIGNMENTS, DUE DATES & GRADING**

Assignment	Due Date	% of Final Grade
<b>Assignment 1: Written Assignment: Reaction Paper to Self-help Meeting</b>	11:59pm 6/4/2014	30%

Assignment	Due Date	% of Final Grade
<b>Assignment 2: Group Projects with Special Populations</b>	Session 12 7/31/2014	30%
<b>Assignment 3: Long-term Recovery Interview and Paper</b>	Session 15 8/21/2014	30%
<b>Class Participation</b>	Ongoing	10%

Each of the major assignments is described below.

**Assignment 1: Written Assignment (Reaction Paper - Self Help Meeting) - 30%**

- The student will attend a traditional 12-step meeting or other non-traditional self-help arena. Please do not attend a group that is led by a professional facilitator. One place to locate 12-step meetings is by looking on the internet.
- Be sure to attend an OPEN meeting where visitors are welcome.
- Try to go alone. If you do find the need to carpool, do not sit in the meeting with your friend. Be aware of how you are feeling, your thoughts, and the dynamics of the group. Please do not take notes or write during the meeting as anonymity is a strong value within self-help meetings and is adhered to by participants.
- The student will write a 5+ page paper that addresses the following issues. Use ALL headings.
  - Briefly describe the meeting, including location, time of day, and composition of the group (including sociocultural aspects such as gender, class, race, etc.)
  - Describe a story that was told at the meeting. Apply this person’s description of their addiction and recovery to Jellinek’s curve.
  - Compare academic references and class content to your experience. From a theoretical point of view, how do the 12 steps work as therapeutic tools?
  - In a paragraph or three, describe your personal experience of the meeting. What dynamics resonated with you? What dynamics discouraged you? What is your personal opinion about the usefulness of 12 step groups for people with addictions and give a rationale for your opinion.

**Due: Post to the platform by 11:59 the night before session 4 (June 4th 2014).**

**Assignment 2: Group Project – Recovery with Special Populations - 30%**

Students will work in a group of no more than three. Students will choose a special group who struggles with addiction ( American Indians, Women, Adolescents, LGBT, etc.) and answer the following questions. **Presentations should be approximately 15-20 minutes in length.** PowerPoints should be developed and used in the presentation.

- What are the major US historical points?
  - Include cultural pain
  - Include organization or immigration
  - Include geographical concentrations
- How do these issues manifest today?
  - Include prevalence of the various substances/behaviors.
- What are cultural practices (pride) that could increase recovery: stability, confidence, adaptive coping mechanisms?

**Due: Post an outline and PowerPoint to the platform by 11:59 the night of session 12 (July 31<sup>st</sup>, 2014).**



**Assignment 3: Long-term Recovery Interview and Paper - 30%**

The student will identify and interview a person of their choice who has been in addiction recovery for over 5 years. Then, the student will write a paper addressing at least the following questions. Use as many direct quotations from the person as possible. Use lots of specific detail when asking questions and recording their answers. The student is to write the paper in “question and answer” format. Additional headings can be used as necessary. The student will use at least 10 academic references when making assertions and exercise APA style of referencing. This paper will be due on the day before the last day of class and will be posted to the platform.

- How does the student know this person?
- What were contributing factors that lead you to use alcohol, drugs, or behaviors in excess?
- What were the circumstances that lead you to believe that you were not in control? (Be specific.)
- How did you feel different in the beginning (first 3 weeks) of your recovery?
- Tell about the process of early (first 6 months) recovery. (See your notes for points.)
- What were the relapse triggers? How did you manage relapse risk?
- What people, places, things, and activities did/do you turn to for your stability?
- How did you know that your life was taking a turn for the better? (Be specific.)
- How is your life different now?
- What do you most appreciate about your recovery?

**Due: Post paper to the platform by 11:59pm on the last day of class (8/21/2014).**

**Participation – 10%****Class Participation (10% of Course Grade)**

Student is expected to come to and remain in class (with webcam on) for entire sessions. Student is expected to participate in class discussions. Texting and working on anything other than course material are considered not participating and participations points will be deducted accordingly.

Due date: Each class session

**Grading**

Late assignments lose 10% for each day they are late. Assignments over 5 days late will not be accepted.

Within the School of Social Work, grades are determined in each class based on the following standards which have been established by the faculty of the School: (1) Grades of A or A- are reserved for student work which not only demonstrates very good mastery of content but which also shows that the student has undertaken a complex task, has applied critical thinking skills to the assignment, and/or has demonstrated creativity in her or his approach to the assignment. The difference between these two grades would be determined by the degree to which these skills have been demonstrated by the student. (2) A grade of B+ will be given to work which is judged to be very good. This grade denotes that a student has demonstrated a more-than-competent understanding of the material being evaluated in the assignment. (3) A grade of B will be given to student work which meets that basic requirements of the assignment. It denotes that the student has done adequate work on the assignment and meets basic course expectations. (4) A grade of B- will denote that a student's performance was less than adequate on an assignment, reflecting only moderate grasp of content and/or expectations. (5) A grade of C would reflect a minimal grasp of the assignment, poor organization of ideas and/or several significant areas requiring improvement. (6) Grades between C- and F will be applied to denote a failure to meet minimum standards, reflecting serious deficiencies in all aspects of a student's performance on the assignment.

Class grades will be based on the following:

Class Grades		Final Grade	
3.85 – 4	A	93 – 100	A
3.60 – 3.84	A-	90 – 92	A-
3.25 – 3.59	B+	87 – 89	B+
2.90 – 3.24	B	83 – 86	B
2.60 – 2.87	B-	80 – 82	B-
2.25 – 2.50	C+	77 – 79	C+
1.90 – 2.24	C	73 – 76	C
		70 – 72	C-

**VIII. REQUIRED AND SUPPLEMENTARY INSTRUCTIONAL MATERIALS & RESOURCES**

**Required Textbooks**

Fetting, M. (2012). *Perspectives on addiction. An integrative treatment model with clinical case studies.* Los Angeles, CA: Sage Publications, Inc.

Khantzian, E. J., & Albanese, M. J. (2008). *Understanding addiction as self medication.* Lanham, MD: Rowman & Littlefield Publishers, Inc.

**Recommended Reading**

Brown, S. (Ed.), & Yalom, I. D. (General Ed.). (1995). *Treating alcoholism.* San Francisco, CA: Jossey-Bass.

Doweiko, H. E. (2009). *Concepts of chemical dependency (7<sup>th</sup> ed.).* Pacific Grove, CA: Brooks/Cole.

Inaba, D. S., & Cohen, W. E. (2007). *Uppers, downers, all arounders (6<sup>th</sup> ed.).* Medford, CT: CNS Publications.

Miller, W., & Rollnick, S. (2002). *Motivational interviewing: Preparing people to change addictive behavior.* New York: The Guilford Press.  
(Instructor Note: Classic.)

van Wormer, K., & Davis, D. R. (2008). *Addiction treatment: A strengths perspective (2<sup>nd</sup> ed.).* Thomson Belmont, CA: Brooks/Cole.

**Note:** Refer to References in Fetting (2012). *Perspectives on addiction.*

**Note:** Additional required and recommended readings may be assigned by the instructor throughout the course.



## Course Schedule—Detailed Description

**Note:** Expert presentations will be presented in different units throughout the semester. We are privileged to have two giants in the field participate in our course, Dr. Stephanie Brown and Dr. Edward Khantzian. Alfredo Papadakis will speak on gangs and recovery. Videos will be shown throughout the semester.

### Unit 1: Introductions

This Unit relates to course objective 1.

#### Required Readings

Fetting, M. (2012). *Perspectives on addiction. An integrative treatment model with clinical case studies*. Los Angeles, CA: Sage Publications, Inc.

(Instructor Note: Please read Preface and Introduction)

#### Recommended Readings

Siegel, R. K. (2005). *Intoxication: Life in pursuit of artificial paradise*. Rochester, Vermont: Park Street Press.

(Instructor Note: Please read chapters 10, 11, 12, 13, and 14.)

### Unit 2: Cultural Statistics & Stories

This Unit relates to course objective 2.

#### Required Readings

Fetting, M. (2012). Cultural statistics & stories. In *Perspectives on addiction. An integrative treatment model with clinical case studies*. (chap. 1, pp. 3-15). Los Angeles, CA: Sage Publications, Inc.

#### Recommended Readings

Van Wormer, K., & Davis, D. R. (2008). Historical perspectives. In *Addiction treatment: A strengths perspective* (2<sup>nd</sup> ed., chap. 2, pp. 44-84). Belmont, CA: Brooks/Cole.

### Unit 3: Socio-Cultural Aspects of Addiction

This Unit relates to course objective 2

#### Required Readings

Fetting, M. (2012). Sociocultural Aspects. In *Perspectives on addiction. An integrative treatment model with clinical case studies*. (chap. 2, pp. 17-24). Los Angeles, CA: Sage Publications, Inc.

#### Recommended Readings

Schaeff, A. W. (1988). *When society becomes an addict*. San Francisco, CA: Harper.  
(Instructor Note: Classic.)

Zoja, L. (2000). *Drugs, addiction and initiation: The modern search for ritual*. MA: Sigo Press.  
(Instructor Note: Classic.)

### Unit 4: Definitions and Class Field Day

This Unit relates to course objectives 2, 3, and 4.

#### Required Readings

Fetting, M. (2012). Definitions. In *Perspectives on addiction. An integrative treatment model with clinical case studies*. (chap. 3, pp. 25-30). Los Angeles, CA: Sage Publications, Inc.

Khantzian, E. J., & Albanese, M. J. (2008). Addiction: Disease or disorder. In *Understanding addiction as self medication* (chap. 2, pp. 7-11). Lanham, MD: Rowman & Littlefield Publishers, Inc.

Khantzian, E. J., & Albanese, M. J. (2008). The SMH and addiction as a problem in self-regulation. In *Understanding addiction as self medication* (chap. 3, pp. 13-20). Lanham, MD: Rowman & Littlefield Publishers, Inc.

Weegmann, M. (2006). Edward Khantzian interview. *Journal of Groups in Addiction and Recovery*, 1(2), 15-32.  
(Instructor Note: See handout.)

### Field Excursion

See assignment 1.

## Unit 5: Diagnosis: Profiles of Addiction

This Unit relates to course objective 3.

### Required Readings

Fetting, M. (2012). Twelve Profiles of Using, Misusing, and Addiction. In *Perspectives on addiction. An integrative treatment model with clinical case studies*. (chap. 4, pp. 33-53). Los Angeles, CA: Sage Publications, Inc.).

Khantzian, E. J., & Albanese, M. J. (2008). *Understanding addiction as self medication*. Lanham, MD: Rowman & Littlefield Publishers, Inc.  
(Instructor Note: Please read chapters 5, 6, 7, and 8.)

### Recommended Readings

Shaffer, H. J. (1986). *What is addiction? – A perspective*. Harvard Medical School, Division on Addictions.

## Unit 6: Eleven Classes of Psychoactive Drugs

This Unit relates to course objectives 2, 3, and 4.

### Required Readings

Fetting, M. (2012). Eleven Classes of Psychoactive Substances. In *Perspectives on addiction. An integrative treatment model with clinical case studies*. (chap. 5, pp. 55-71). Los Angeles, CA: Sage Publications, Inc.

Khantzian, E. J., & Albanese, M. J. (2008). Nicotine, marijuana, and the SMH. In *Understanding addiction as self medication* (chap. 10, pp. 81-86). Lanham, MD: Rowman & Littlefield Publishers, Inc.

Khantzian, E. J., & Albanese, M. J. (2008). The neurobiology of addiction and the SMH. In *Understanding addiction as self medication* (chap. 12, pp. 97-104). Lanham, MD: Rowman & Littlefield Publishers, Inc.

### Recommended Readings

Fetting, M. (2012). Further Study. In *Perspectives on addiction. An integrative treatment model with clinical case studies*. (chap. 5, p. 71). Los Angeles, CA: Sage Publications, Inc.

Streetdrugs.org. (n.d.). *Street drugs: A drug information guide*. Retrieved from <http://streetdrugs.org/>

## Unit 7: Ten Models of Treatment

This Unit relates to course objectives 2, 3, 4, and 5.

**Required Readings**

Brower, K. J., Blow, F. C., & Beresford, T. P. (1989). Treatment implications of chemical dependency models: An integrative approach. *Journal of Substance Abuse Treatment*, 6(3), 147-157.  
(Instructor Note: See handout.)

Fetting, M. (2012). Ten Models of Treatment. In *Perspectives on addiction. An integrative treatment model with clinical case studies*. (chap. 6, pp. 75-92). Los Angeles, CA: Sage Publications, Inc.

Khantzian, E. J., & Albanese, M. J. (2008). Contexts and models for understanding addiction—A brief overview. In *Understanding addiction as self medication* (chap. 5, pp. 31-37). Lanham, MD: Rowman & Littlefield Publishers, Inc.

**Recommended Readings**

Miller, W., & Rollnick, S. (2002). *Motivational interviewing: Preparing people to change addictive behavior*. New York: The Guilford Press.

(Instructor Note: Please read chapters 1-14.)

Prochaska, J. O., DiClemente, C. C., & Norcross, J. (1993). In search of how people change: Applications to addictive behaviors. *Journal of Addictions Nursing*, 5(1), 2-16.

**Unit 8: Self Medication Theorists**

This Unit relates to course objectives 3, 4, and 5.

**Required Readings**

Fetting, M. (2012). Self-Medication, Psychoanalytic, and Psychodynamic Theories. In *Perspectives on addiction. An integrative treatment model with clinical case studies*. (chap. 7, pp. 93-110). Los Angeles, CA: Sage Publications, Inc.

Khantzian, E. J., & Albanese, M. J. (2008). *Understanding addiction as self medication*. Lanham, MD: Rowman & Littlefield Publishers, Inc.

(Instructor Note: Please read chapters 6, 7, 8, 9, and 10.)

**Recommended Readings**

Dodes, L. (2002). Time for a change. In *The heart of addiction* (chap. 1, pp. 1-9). New York: Harper Collins Publishers.

Khantzian, E. J. (1999). *Treating addictions as a human process*. NJ: Jason Aronson, Inc.

(Instructor Note: Please read chapters 8-15.)

Rinsley, D. (1988). The dipsas revisited: Comments on addiction and personality. *Journal of Substance Abuse Treatment*, 5, 1-7.

(Instructor Note: Classic.)

Tatarsky, A. (Ed.). (2007). Drug use as an attempt to cope. In *Harm reduction psychotherapy: New treatment for drug & alcohol problems* (chap. 6, pp. 160-181). New Jersey: Jason Aronson.

Walant, K. (1995). The immersive moment. In *Creating the capacity for attachment* (chap. 4, pp. 103-137). Northvale, NJ: Jason Aronson.

(Instructor Note: Classic.)

Wurmser, L. (1987). Flight from conscience: Experiences with psychoanalytic treatment of compulsive drug users. *Journal of Substance Abuse Treatment*, 4, 157-168.

(Instructor Note: Classic.)

## Unit 9: Stephanie Brown - A Developmental Model of Recovery

This Unit relates to course objectives 3, 4, and 5.

### Required Readings

Fetting, M. (2012). Stephanie Brown and an Integrative Treatment Model. In *Perspectives on addiction. An integrative treatment model with clinical case studies*. (chap. 8, pp. 113-118). Los Angeles, CA: Sage Publications, Inc.

### Recommended Readings

Brown, S. (Ed.), & Yalom, I. D. (General Ed.). (1995). *Treating alcoholism*. San Francisco, CA: Jossey-Bass.

(Instructor Note: Please read chapter 1 and chapters 3-7.)

## Unit 10-Unit 14: The Integrative Treatment Model

This Unit relates to course objectives 3, 4, and 5.

### Required Readings

Fetting, M. (2012). The Integrative Treatment Model. In *Perspectives on addiction. An integrative treatment model with clinical case studies*. (chap. 9-12, pp. 119-275). Los Angeles, CA: Sage Publications, Inc.

Khantzian, E. J., & Albanese, M. J. (2008). How the SMH can guide treatment and recovery. In *Understanding addiction as self medication* (chap. 13, pp. 105-115). Lanham, MD: Rowman & Littlefield Publishers, Inc.

### Recommended Readings

Brown, S. (Ed.), & Yalom, I. D. (General Ed.). (1995). *Treating alcoholism*. San Francisco, CA: Jossey-Bass.

(Instructor Note: Please read chapter 1 and chapters 3-7.)

Miller, W., & Rollnick, S. (2002). *Motivational interviewing: Preparing people to change addictive behavior*. New York: The Guilford Press.

(Instructor Note: Please read chapters 1-14.)

## Unit 15: Family and Group Therapy, Conclusion

This Unit relates to course objectives 2 and 5.

### Recommended Readings

Brown, S. (Ed.), & Yalom, I. D. (General Ed.). (1995). The alcoholic family: A developmental model of recovery. In *Treating alcoholism* (chap. 8, pp. 279-315). San Francisco, CA: Jossey-Bass.

Brown, S. (Ed.), & Yalom, I. D. (General Ed.). (1995). Treating the alcoholic couple. In *Treating alcoholism* (chap. 9, pp. 317-352). San Francisco, CA: Jossey-Bass.

Brown, S. (Ed.), & Yalom, I. D. (General Ed.). (1995). Alcoholism and the family. In *Treating alcoholism* (chap. 10, pp. 353-396). San Francisco, CA: Jossey-Bass.

Miller, W., & Rollnick, S. (2002). Motivational Interviewing with couples. In *Motivational interviewing: Preparing people to change addictive behavior* (chap. 23, pp. 347-361). New York: The Guilford Press.

- Miller, W., & Rollnick, S. (2002). Perils and possibilities of group-based motivational interviewing. In *Motivational interviewing: Preparing people to change addictive behavior* (chap. 25, pp. 377-390). New York: The Guilford Press.
- SAMHSA. (n.d.). SAMHSA issues group therapy guide for substance use disorders treatment. Retrieved from [www.samhsa.gov](http://www.samhsa.gov)
- Tatarsky, A. (Ed.). (2007). The healing power of groups and the residential therapeutic community. In *Harm reduction psychotherapy: New treatment for drug & alcohol problems* (chap. 9, pp. 262-309). New Jersey: Jason Aronson.
- Tatarsky, A. (Ed.). (2007). Harm reduction group therapy. In *Harm reduction psychotherapy: New treatment for drug & alcohol problems* (chap. 10, pp. 310-346). New Jersey: Jason Aronson.
- van Wormer, K., & Davis, D. R. (2008). Mutual-help groups: A strengths perspective. In *Addiction treatment: A strengths perspective* (2<sup>nd</sup> ed., chap. 12, pp. 489-520). Thomson Belmont, CA: Brooks/Cole.
- Weegmann, M. (2006). Edward Khantzian interview. *Journal of Groups in Addiction and Recovery*, 1(2), 15-32.  
(Instructor Note: See handout.)

## University Policies and Guidelines

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### IX. ATTENDANCE POLICY

Students are expected to attend every class and to remain in class for the duration of the unit. Failure to attend class or arriving late may impact your ability to achieve course objectives which could affect your course grade. Students are expected to notify the instructor by email ([winsett@usc.edu](mailto:winsett@usc.edu)) of any anticipated absence or reason for tardiness.

University of Southern California policy permits students to be excused from class for the observance of religious holy days. This policy also covers scheduled final examinations which conflict with students' observance of a holy day. Students must make arrangements *in advance* to complete class work which will be missed, or to reschedule an examination, due to holy days observance.

Please refer to Scampus and to the USC School of Social Work Student Handbook for additional information on attendance policies.

### X. STATEMENT ON ACADEMIC INTEGRITY

USC seeks to maintain an optimal learning environment. General principles of academic honesty include the concept of respect for the intellectual property of others, the expectation that individual work will be submitted unless otherwise allowed by an instructor, and the obligations both to protect one's own academic work from misuse by others as well as to avoid using another's work as one's own. All students are expected to understand and abide by these principles. *SCampus*, the Student Guidebook, contains the Student Conduct Code in Section 11.00, while the recommended sanctions are located in Appendix A: <http://www.usc.edu/dept/publications/SCAMPUS/gov/>. Students will be referred to the Office of Student Judicial Affairs and Community Standards for further review, should there be any suspicion of academic dishonesty. The Review process can be found at: <http://www.usc.edu/student-affairs/SJACS/>.

Additionally, it should be noted that violations of academic integrity are not only violations of USC principles and policies, but also violations of the values of the social work profession.

### XI. STATEMENT FOR STUDENTS WITH DISABILITIES

Any student requesting academic accommodations based on a disability is required to register with Disability Services and Programs (DSP) each semester. A letter of verification for approved accommodations can be obtained from DSP. *Please be sure the letter is delivered to the instructor as early in the semester as possible.* DSP is located in STU 301 and is open from 8:30 a.m. to 5:00 p.m., Monday through Friday.

Students from all academic centers (including the Virtual Academic Center) may contact Ed Roth, Director of the DSP office at 213-740-0776 or [ability@usc.edu](mailto:ability@usc.edu).

### XII. EMERGENCY RESPONSE INFORMATION

**Note:** The following Emergency Response Information pertains to students on campus, but please note its importance should you be on campus for a temporary or extended period. When not on campus: Call the 911 listing in your local community for any emergency.



To receive information, call the main number (213) 740-2711, press #2. “For recorded announcements, events, emergency communications or critical incident information.”

To leave a message, call (213) 740-8311

For additional university information, please call (213) 740-9233

Or visit university website: <http://emergency.usc.edu>

If it becomes necessary to evacuate the building, please go to the following locations carefully and using stairwells only. Never use elevators in an emergency evacuation.

Students may also sign up for a **USC Trojans Alert** account to receive alerts and emergency notifications on their cell phone, pager, PDA, or e-mail account. Register at <https://trojansalert.usc.edu>.

UNIVERSITY PARK CAMPUS		ACADEMIC CENTERS	
<b>City Center</b>	Front of Building (12 <sup>th</sup> & Olive)	<b>Orange County</b>	Faculty Parking Lot
<b>MRF</b>	Lot B	<b>San Diego</b>	Building Parking Lot
<b>SWC</b>	Lot B	<b>Skirball</b>	Front of Building
<b>VKC</b>	McCarthy Quad		
<b>WPH</b>	McCarthy Quad		

Do not re-enter the building until given the “all clear” by emergency personnel.

### **XIII. STATEMENT ABOUT INCOMPLETES**

The Grade of Incomplete (IN) can be assigned only if there is work not completed because of a documented illness or some other emergency occurring after the 12th week of the semester. Students must NOT assume that the instructor will agree to the grade of IN. Removal of the grade of IN must be instituted by the student and agreed to be the instructor and reported on the official “Incomplete Completion Form.”

### **XIV. POLICY ON LATE OR MAKE-UP WORK**

Papers are due on the day and time specified. Extensions will be granted only for extenuating circumstances. If the paper is late without permission, the grade will be affected.

### **XV. POLICY ON CHANGES TO THE SYLLABUS AND/OR COURSE REQUIREMENTS**

It may be necessary to make some adjustments in the syllabus during the semester in order to respond to unforeseen or extenuating circumstances. Adjustments that are made will be communicated to students both verbally and in writing.

### **XVI. CODE OF ETHICS OF THE NATIONAL ASSOCIATION OF SOCIAL WORKERS**

*Approved by the 1996 NASW Delegate Assembly and revised by the 2008 NASW Delegate Assembly [http://www.socialworkers.org/pubs/Code/code.asp]*

#### **Preamble**

The primary mission of the social work profession is to enhance human wellbeing and help meet the basic human needs of all people, with particular attention to the needs and empowerment of people who are vulnerable, oppressed, and living in poverty. A historic and defining feature of social work is the profession’s focus on individual wellbeing in a social context and the wellbeing of society. Fundamental to

social work is attention to the environmental forces that create, contribute to, and address problems in living.

Social workers promote social justice and social change with and on behalf of clients. “Clients” is used inclusively to refer to individuals, families, groups, organizations, and communities. Social workers are sensitive to cultural and ethnic diversity and strive to end discrimination, oppression, poverty, and other forms of social injustice. These activities may be in the form of direct practice, community organizing, supervision, consultation administration, advocacy, social and political action, policy development and implementation, education, and research and evaluation. Social workers seek to enhance the capacity of people to address their own needs. Social workers also seek to promote the responsiveness of organizations, communities, and other social institutions to individuals’ needs and social problems.

The mission of the social work profession is rooted in a set of core values. These core values, embraced by social workers throughout the profession’s history, are the foundation of social work’s unique purpose and perspective:

- Service
- Social justice
- Dignity and worth of the person
- Importance of human relationships
- Integrity
- Competence

This constellation of core values reflects what is unique to the social work profession. Core values, and the principles that flow from them, must be balanced within the context and complexity of the human experience.

## **XVII. COMPLAINTS**

If you have a complaint or concern about the course or the instructor, please discuss it first with the instructor. If you feel you cannot discuss it with the instructor, contact your advisor or Dr. Paul Maiden, Vice Dean and Professor of Academic and Student Affairs, at [рмаiden@usc.edu](mailto:рмаiden@usc.edu). Or, if you are a student of the VAC, contact June Wiley, Director of the Virtual Academic Center, at (213) 821-0901 or [june.wiley@usc.edu](mailto:june.wiley@usc.edu) for further guidance

## **XVIII. TIPS FOR MAXIMIZING YOUR LEARNING EXPERIENCE IN THIS COURSE**

- ✓ Be mindful of getting proper nutrition, exercise, rest and sleep!
- ✓ Come to class.
- ✓ Complete required readings and assignments before coming to class.
- ✓ Before coming to class, review the materials from the previous Unit and the current Unit, and scan the topics to be covered in the next Unit.
- ✓ Come to class prepared to ask any questions you might have.
- ✓ Participate in class discussions.
- ✓ After you leave class, review the materials assigned for that Unit again, along with your notes from that Unit.
- ✓ If you don't understand something, ask questions! Ask questions in class, during office hours, and/or through email!
- ✓ Keep up with the assigned readings.

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*Don't procrastinate or postpone working on assignments.*

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