

USC School of Social Work

Social Work 617

Substance Related and Behavioral Addictive Disorders and Recovery

3 Units

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I. COURSE PREREQUISITES

This elective course is open to School of Social Work students who have completed their foundation year course requirements and open to all concentration students.

II. CATALOGUE DESCRIPTION

Causal exploration of substance related and behavioral addictive disorders. Evidence-based and practice informed treatment models for vulnerable individuals, groups and families.

III. COURSE DESCRIPTION

This course uses a social work systemic approach to understanding substance misuse and other addictive behaviors. At present, there are no unifying theories of addiction and there are no unifying theories on treating addictions. Given the absence of overarching theoretical support, this course begins with a historical overview of addiction and the systems used in the past to try to eradicate addiction to illegal substances and the systems of care used to treat addiction and improve the well-being of vulnerable individuals and communities. The course is designed to then provide an overview of the epidemiological perspective, ethical and legal perspective, and sociological perspective. It also contains information on current treatment trends including the recognized levels of care. The course ends with an overview of both the historic and the contemporary policy trends for how our society views addiction, responds to those people affected by addiction, advances social and economic justice, and to eradicate pressing societal problems in complex and culturally diverse environments.

IV. COURSE OBJECTIVES

The Substance Related and Behavioral Addictive Disorders course SOWK 617 will:

Objective #	Objectives
1	Introduce to the field of substance related and behavioral misuse including historical and contemporary clinical, ethical, legal, political, sociological, public policy, and criminal justice perspectives. Discuss and assess ways the social work profession influences how the field of addictions is approached from both a clinical and policy perspective.
2	Introduce the context and stages of substance and behavioral misuse and dependence, as well as the stages of recovery, by exploring the Jellinek curve, definitions, etiological theories, including stigma, shame.
3	Exploring commonly used legal and illicit psychoactive drugs and behaviors and their resulting acute and long-term effects on the body and brain.
4	Introduce the various levels of addiction recovery care and the professional role and tasks of social work. Critically survey and evaluate evidence-based and evidence-informed intervention methods.

V. COURSE FORMAT / INSTRUCTIONAL METHODS

The format of the course will consist of didactic instruction and experiential exercises. Case vignettes, videos, and role-plays and structured small group activities will also be used to facilitate the students' learning. Material from the field will be used to illustrate class content and to provide integration between class and field. Confidentiality of material shared in class will be maintained. 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.

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		4
2 Ethical Practice	*	1 & 4
3 Critical Thinking	*	4
4 Diversity in Practice	*	1
5 Human Rights & Justice	*	1 & 2
6 Research Based Practice	*	4
7 Human Behavior	*	2 & 4
8 Policy Practice	*	1
9 Practice Contexts	*	4
10 Engage, Assess, Intervene, Evaluate	*	4

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
Professional Identity —Identify as a professional social worker and conduct oneself accordingly. Social workers competent in Professional Identity: <ul style="list-style-type: none"> ▪ Serve as representatives of the profession, its mission, and its core values. ▪ Know the profession's history. ▪ Commit themselves to the profession's enhancement and to their own professional conduct and growth. 	1. Advocate for client access to the services of social work.	Recovery Intervention in Group Settings
	2. Practice personal reflection and self-correction to ensure continual professional development.	Long-term Recovery Interview and Paper
	3. Attend to professional roles and boundaries.	Class Participation
	4. Demonstrate professional demeanor in behavior, appearance, and communication.	
	5. Engage in career-long learning.	
	6. Use supervision and consultation.	
Ethical Practice —Apply social work ethical principles to guide professional practice. Social workers competent in Ethical Practice: <ul style="list-style-type: none"> ▪ Fulfill their obligation to conduct themselves ethically and to engage in ethical decision-making. ▪ Are knowledgeable about the value base of the profession, its ethical standards, and relevant law. 	7. Recognize and manage personal values in a way that allows professional values to guide practice.	Group Project – Recovery with At-risk Populations
	8. Make ethical decisions by applying standards of the National Association of Social Workers Code of Ethics.	Class Participation
	9. Tolerate ambiguity in resolving ethical conflicts.	
	10. Apply strategies of ethical reasoning to arrive at principled decisions.	

<p>Critical Thinking—Apply critical thinking to inform and communicate professional judgments.</p> <p>Social workers competent in Critical Thinking:</p> <ul style="list-style-type: none"> Are knowledgeable about the principles of logic, scientific inquiry, and reasoned discernment. Use critical thinking augmented by creativity and curiosity. Understand that critical thinking also requires the synthesis and communication of relevant information. 	<p>11. Distinguish, appraise, and integrate multiple sources of knowledge, including research-based knowledge, and practice wisdom.</p> <p>12. Analyze models of assessment, prevention, intervention, and evaluation.</p> <p>13. Demonstrate effective oral and written communication in working with individuals, families, groups, organizations, communities, and colleagues.</p>	<p>Long-term Recovery Interview and Paper</p> <p>Policy Impact and Implications Paper</p> <p>Class Participation</p>
<p>Diversity in Practice—Engage diversity and difference in practice.</p> <p>Social workers competent in Diversity in Practice:</p> <ul style="list-style-type: none"> Understand how diversity characterizes and shapes the human experience and is critical to the formation of identity. 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. 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. 	<p>14. Recognize the extent to which a culture's structures and values may oppress, marginalize, alienate, or create or enhance privilege and power.</p> <p>15. Gain sufficient self-awareness to eliminate the influence of personal biases and values in working with diverse groups.</p> <p>16. Recognize and communicate understanding of the importance of difference in shaping life experiences.</p> <p>17. View themselves as learners and engage those with whom they work as informants.</p>	<p>Group Project – Recovery with At-risk Populations</p> <p>Class Participation</p>

<p>Human Rights & Justice—Advance human rights and social and economic justice.</p> <p>Social workers competent in Human Rights & Justice:</p> <ul style="list-style-type: none"> Acknowledge that each person, regardless of position in society, has basic human rights, such as freedom, safety, privacy, an adequate standard of living, health care, and education. Recognize the global interconnections of oppression and are knowledgeable about theories of justice and strategies to promote human and civil rights. Incorporates social justice practices in organizations, institutions, and society to ensure that these basic human rights are distributed equitably and without prejudice. 	18. Understand the forms and mechanisms of oppression and discrimination.	Reaction Paper to Self-help Meeting
	19. Advocate for human rights and social and economic justice.	Group Project with At-risk Populations
	20. Engage in practices that advance social and economic justice.	Class Participation
<p>Research Based Practice—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"> 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. Comprehend quantitative and qualitative research and understand scientific and ethical approaches to building knowledge. 	21. Use practice experience to inform scientific inquiry.	Group Project with At-risk Populations
	22. Use research evidence to inform practice.	Policy Impact and Implications Paper Class Participation

<p>Human Behavior—Apply knowledge of human behavior and the social environment.</p> <p>Social workers competent in Human Behavior:</p> <ul style="list-style-type: none"> 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. Apply theories and knowledge from the liberal arts to understand biological, social, cultural, psychological, and spiritual development. 	<p>23. Utilize conceptual frameworks to guide the processes of assessment, intervention, and evaluation.</p> <p>24. Critique and apply knowledge to understand person and environment.</p>	<p>Long-term Recovery Interview and Paper</p> <p>Class Participation</p>
<p>Policy Practice—Engage in policy practice to advance social and economic well-being and to deliver effective social work services.</p> <p>Social workers competent in Policy Practice:</p> <ul style="list-style-type: none"> Understand that policy affects service delivery, and they actively engage in policy practice. Know the history and current structures of social policies and services, the role of policy in service delivery, and the role of practice in policy development. 	<p>25. Analyze, formulate, and advocate for policies that advance social well-being.</p> <p>26. Collaborate with colleagues and clients for effective policy action.</p>	<p>Policy Impact and Implications Paper</p> <p>Class Participation</p>

<p>Practice Contexts—Respond to contexts that shape practice.</p> <p>Social workers competent in Practice Contexts:</p> <ul style="list-style-type: none"> Are informed, resourceful, and proactive in responding to evolving organizational, community, and societal contexts at all levels of practice. Recognize that the context of practice is dynamic, and use knowledge and skill to respond proactively. 	<p>27. Continuously discover, appraise, and attend to changing locales, populations, scientific and technological developments, and emerging societal trends to provide relevant services.</p>	<p>Recovery Intervention in Group Settings</p> <p>Group Projects with At-risk Populations</p> <p>Long-term Recovery Interview and Paper</p> <p>Class Participation</p>
	<p>28. Provide leadership in promoting sustainable changes in service delivery and practice to improve the quality of social services.</p>	

<p>Engage, Assess, Intervene, Evaluate—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"> ▪ Identifying, analyzing, and implementing evidence-based interventions designed to achieve client goals ▪ Using research and technological advances ▪ Evaluating program outcomes and practice effectiveness ▪ Developing, analyzing, advocating, and providing leadership for policies and services ▪ Promoting social and economic justice 	<p>29. 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>30. 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>31. 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>32. Evaluation: Critically analyze, monitor, and evaluate interventions.</p>	<p>Recovery Intervention in Group Settings</p> <p>Group Projects with At-risk Populations</p> <p>Long-term Recovery Interview and Paper</p> <p>Class Participation</p>
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VII. COURSE ASSIGNMENTS, DUE DATES & GRADING

Assignment	Due Date	% of Final Grade
Assignment 1: Policy Impact and Implications Paper	Midnight before session 3	20%
Assignment 2: Written Assignment: Reaction Paper to Self-help Meeting	Midnight before Session 4	15%
Assignment 3: Recovery Intervention in Group Settings	Session 8	5%
Assignment 4: Group Projects with At-risk Populations	Session 11	25%
Assignment 5: Long-term Recovery Interview and Paper	Midnight before Session 15	25%
Class Participation	Ongoing	10%

Each of the major assignments is described below.

Assignment 1: Policy Impact and Implications Paper – 20%

The student will conduct a literature review pertaining to current drug policy in the US and will identify the primary intent of one of two of the following areas of policy.

1. Prevention of illegal drug use.
2. Treatment of drug addiction.

Here are some web links where you can search for a policy.

www.drugpolicy.org

www.samhsa.gov

The paper is to include 1) a discussion of how the policies in the area chosen have changed over time and then 2) a discussion, based on knowledge gleaned from this class, of possible changes that could be made to improve policy in this area. Please use the following points and format the paper in heading, then answer format.

- Choose and research a policy that has been used in the United States. This policy can be long standing or quite new.
 - For example, this could be interdiction method, criminalization of addiction, funding of treatment.
- Trace the evolution of that policy (or policy area) and explain it so the reader can follow along with the changes.
- Based on what you have learned in this class and in others, discuss what changes to policy you would suggest to improve how we respond to either illegal drug use or addiction treatment. Include in your discussion barriers to the changes that you are recommending.

This paper should be no longer than 5 pages, at least 5 academic references, and should demonstrate the results of your literature review and knowledge that you have gained from this class.

Due: 11:59pm before Session 3.

Assignment 2: Written Assignment (Reaction Paper - Self Help Meeting) - 15%

- The student will attend a traditional 12-step meeting or other non-traditional self-help arena. Please do not attend a group that is lead by a professional facilitator. One place to locate 12-step meetings is by looking on the Internet. Papers where only a video of a meeting is watched will not be accepted.
- Be sure to attend an OPEN meeting where visitors are welcome. Those who are able to honestly identify as having been in the process of addiction are welcome to go to a CLOSED meeting.
- 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.
- Compare at least 5 academic references and class content to your experience and throughout the paper to make academic sense of your observations.
- The student will write a 5-page (or more if needed) paper that addresses the following issues. Use ALL headings.
 - 1) Briefly describe the meeting, including location, time of day, and composition of the group (including sociocultural aspects such as gender, class, race, etc.)
 - 2) Describe a story that was told at the meeting. Organize the story with the headings of the Jellinek chart, using both the downward spiral and the process of recovery. (Sometimes people are not comprehensive about all the stages. It is up to you to meet this requirement. Sometimes people talk with the person afterwards. Sometimes people make up the missing parts.)
 - 3) From a theoretical point of view, how do the 12 steps work as therapeutic tools?
 - 4) 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: 11:59pm the night before Session 4.

Assignment 3: Group Roles and Intervention in Recovery Group Settings – 5%

Students will participate in an in class activity for the purpose of identifying common roles in groups, stages of group development, and identifying challenging group dynamics and effective interventions. This activity will be interwoven into Unit 8.

The student will come to this unit with their research on the following items.

- How groups are used in addiction intervention / treatment
- Identification and examples of common group roles
- Identification and examples of effective group interventions of challenging situations.

Due: In class, Session 8 – Must be present in class to participate and receive points.

Assignment 4: Group Project – Recovery with At-risk Populations - 25%

Students will work in a group of no more than three. Students will choose an identifiable group who struggles with addiction and answer the following questions. Presentations should be approximately 20 minutes in length. Power Points should be developed and will be posted to a place of the instructor's direction for the class to view.

- What are the major US historical points?
 - Include cultural issues (How has this group been systematically oppressed?)
 - Include organization or immigration (Identify major historical points of organization or immigration)
 - Include geographical concentrations (Where in the USA are these groups concentrated)
- How do these issues manifest today?
 - Include prevalence of the various substances/behaviors. (Utilize official websites and documents for statistic collection.)
- What are cultural practices (pride) that could increase recovery: stability, confidence, and adaptive coping mechanisms?
- Special treatment considerations with this special population
 - What treatments are ineffective or most effective?

Due: To be presented in class during Units 13 or 14.

Assignment 5: Long-term Recovery Interview and Paper - 25%

The student will identify and interview a person of their choice who has been in addiction recovery for **over 5 years, without relapse**. 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 and is encouraged to add discussion sections as appropriate to discuss theory and integrate academic references. Additional headings can be used as necessary. The student will use at least 5 academic references when making assertions and exercise APA style of referencing however, the student may choose to use first person voice when writing this paper. The expected number of pages for the paper in this assignment is 10 pages. This paper is due on the day before the last day of class and will be posted to a place of the instructor's direction.

- 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?
- What were the most helpful and least helpful things people did during your recovery?

The instructor may add additional questions about content that was a focus of your class.

Due: 11:59pm the night before session 15.

Participation – 10%

Class Participation (10% of Course Grade)

Student is expected to come to and remain in class 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

Guidelines for Evaluating Class Participation

10: Outstanding Contributor: Contributions in class reflect exceptional preparation and participation is substantial. Ideas offered are always substantive, provides one or more major insights as well as direction for the class. Application to cases held is on target and on topic. Challenges are well substantiated, persuasively presented, and presented with excellent comportment. If this person were not a member of the class, the quality of discussion would be diminished markedly. Exemplary social work behavior in experiential exercises and demonstrating on target behavior in role-plays, small group discussions, and other activities.

9: Very Good Contributor: Contributions in class reflect thorough preparation and frequency of participation is high. Ideas offered are usually substantive and provide good insights and sometimes direction for the class. Application to cases held is usually on target and on topic. Challenges are well substantiated, often persuasive, and presented with excellent comportment. If this person were not a member of the class, the quality of discussion would be diminished. Good activity in experiential exercises demonstrating behavior that is usually on target in role-plays, small group discussions, and other activities.

8: Good Contributor: Contributions in class reflect solid preparation. Ideas offered are usually substantive and participation is very regular, provides generally useful insights but seldom offer a new direction for the discussion. Sometimes provides application of class material to cases held. Challenges are sometimes presented, fairly well substantiated, and are sometimes persuasive with good comportment. If this person were not a member of the class, the quality of

discussion would be diminished somewhat. Behavior in experiential exercises demonstrates good understanding of methods in role-plays, small group discussions, and other activities.

7: Adequate Contributor: Contributions in class reflect some preparation. Ideas offered are somewhat substantive, provides some insights but seldom offers a new direction for the discussion. Participation is somewhat regular. Challenges are sometimes presented, and are sometimes persuasive with adequate comportment. If this person were not a member of the class, the quality of discussion would be diminished slightly. Occasionally applies class content to cases. Behavior in experiential exercises is occasionally sporadically on target demonstrating uneven understanding of methods in role-plays, small group discussions, and other activities.

6: Inadequate: This person says little in class. Hence, there is not an adequate basis for evaluation. If this person were not a member of the class, the quality of discussion would not be changed. Does not participate actively in exercises but sits almost silently and does not ever present material to the class from exercises. Does not appear to be engaged.

5: Non-Participant: Attends class only.

0: Unsatisfactory Contributor: Contributions in class reflect inadequate preparation. Ideas offered are seldom substantive; provides few if any insights and never a constructive direction for the class. Integrative comments and effective challenges are absent. Comportment is negative. If this person were not a member of the class, valuable airtime would be saved. Is unable to perform exercises and detracts from the experience.

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 – 2.89	B-	80 – 82	B-
2.25 – 2.59	C+	77 – 79	C+
1.90 – 2.24	C	73 – 76	C
		70 – 72	C-

USC School of Social Work Grading Standards

Within the School of Social Work, grades are determined in each class based on the following standards that 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 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 tested in the assignment.

(3) A grade of B will be given to student work, which meets the 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 assignments, poor organization of ideas and/or several significant areas requiring improvement.

(6) Grades between C- to 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.

VIII. REQUIRED AND SUPPLEMENTARY INSTRUCTIONAL MATERIALS & RESOURCES

Required Textbooks

Maté, Gabor. (2010). *In the realm of the hungry ghost: Close encounters with addiction*. North Atlantic Books. (There are no actual assigned chapters for this book. The student should pace reading throughout the semester and be prepared for classroom discussions.

McNeece, C. A. & DiNitto, D. (2012). *Chemical dependency: A systems approach*. (4th Ed.) Allyn & Bacon.

Quick Reference To Psychotropic Medication – (most recent year)

<http://psyd-fx.com/quickreference2014.pdf>

-OR-

Psych Drugs. Smart Phone App (free)

Guidebook for APA Style Formatting

American Psychological Association (2009). *Publication manual of the American Psychological Association, 6th Edition*.

Optional Reading

Brown, S. & Yalom, I. (1997). *Treating alcoholism*. Jossey-Bass. (Classic).

Hansen, G., Venturelli, P., & Fleckenstein, A. (2008). *Drugs and society*. 10th Ed. Jones & Bartlett Publishers.

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

Van Wormer, K. and Davis D. R. (2008). *Addiction treatment: A strengths perspective*. 2nd Ed. Brooks / Cole: Belmont, CA.

Walant, K. B. (1995). *Creating the capacity for attachment: Treating addictions and the alienated self*. New York: Rowman & Littlefield Publishers, Inc. (classic)

Journal of Addiction Studies

Journal of Social Work Practice in the Addictions

Note: the instructor throughout the course may assign additional required and optional readings.

Optional Resources

Articles

Podcasts

Videos

Websites such as:

- aa.org
- bhmr.org
- csat.org
- <http://www.ihra.net> (International Association for Harm Reduction)
- projectcork.org
- samsha.org (Substance Abuse and Mental Health Services Administration)
- whitebison.org

Course Overview

Unit	Topics
1	<ul style="list-style-type: none"> ■ Introduction <ul style="list-style-type: none"> ➤ Introductions ➤ Introduction to course ➤ Format, syllabus, assignments, objectives and overview of course material
2	<ul style="list-style-type: none"> ■ Historical, ethical, legal/political, sociological, epidemiological perspectives on substance use and abuse, and misuse. <ul style="list-style-type: none"> ▼ History of Addiction Intervention ▼ Primary, Secondary, Tertiary Interventions
3	<ul style="list-style-type: none"> ■ Understanding the process of addiction; Jellinek Chart <ul style="list-style-type: none"> ▼ Definitions ▼ DSM 5 ▼ Etiological Theories <ul style="list-style-type: none"> ➤ Nature: Neuropsychology ➤ Nurture <ul style="list-style-type: none"> ○ Learned ○ Self-medication ○ Psychic: <ul style="list-style-type: none"> ▪ Trauma ▪ Early Attachment Loss ○ Physical
4	<ul style="list-style-type: none"> ■ Understanding how commonly used psychoactive drugs work on the body. <ul style="list-style-type: none"> ▼ Epidemiology: Prevalence, incidence, risk factors ▼ Street names, pleasurable effects, paraphernalia, risk of overuse and long-term use
5	<ul style="list-style-type: none"> ➤ Understanding how commonly used psychoactive drugs work on the body, continued

Unit	Topics
6	<ul style="list-style-type: none"> ○ Levels of Care <ul style="list-style-type: none"> ▪ Screening (Screening, Brief Intervention, and Referral to Treatment: SBIRT) <ul style="list-style-type: none"> ▪ Social Work role in identification ▪ Assessment <ul style="list-style-type: none"> ▪ Best Practices for Identification ▪ Detox ▪ Intensive Outpatient Program ▪ Residential Treatment ▪ Sober Living ▪ Relapse Prevention / Maintenance ▪ Ongoing Outpatient Treatment <ul style="list-style-type: none"> ▪ Continuity of Care (Potential Impact) ▪ Affordable Care Act ▪ Public Health vs. Private Care ▪ Third-party payers
7	<ul style="list-style-type: none"> ○ Evidence-based / Evidence Informed Intervention Methods <ul style="list-style-type: none"> ▪ Motivational Interviewing ▪ Seeking Safety ▪ Illness Management and Recovery ▪ Harm Reduction ▪ Narrative Therapy ▪ 12-step Communities ▪ Pharmacology
8	<ul style="list-style-type: none"> ○ Recovery Intervention in Group Settings ○ Intervention skills with more challenging roles and group dynamics.
9	<ul style="list-style-type: none"> ○ Assessment and Evidence-based Intervention with People with Co-occurring Disorders
10	<ul style="list-style-type: none"> ○ Evidence-based Intervention for Early, Transition, Ongoing Recovery and Relapse Prevention ○ Addiction in the Workplace ○ Burnout Prevention and Intervention

Unit	Topics
11	<ul style="list-style-type: none"> ○ Evaluation of Treatment <ul style="list-style-type: none"> ○ Barriers to treatment <ul style="list-style-type: none"> ▪ Culture of use lifestyle ▪ How does coerced treatment compare to voluntary treatment? ○ Apply research skills to evaluating the prevention of substance use and process disorders; identify and use evaluation tools for substance use and process disorders and prevention ○ Communicate and disseminate evaluation results appropriate to the intended audience ○ Work collaboratively with evaluators / researchers to assess intervention efficacy and effectiveness.
12	○ Recovery with Families
13	<ul style="list-style-type: none"> ○ Evidence-based Intervention with Special Populations <ul style="list-style-type: none"> ➤ The impact of stigma and shame
14	<ul style="list-style-type: none"> ▪ Evidence-based interventions with Special Populations, continued
15	<ul style="list-style-type: none"> ○ Wrap-up ○ Student Evaluations
STUDY DAYS / NO CLASSES	
FINAL EXAMINATIONS	

Course Schedule—Detailed Description**Unit 1: Introduction****Topics**

- Introductions
- Introduction to course
- Format, syllabus, assignments, objective, and overview of course material

This Unit relates to course objectives 1 and 2.

Required Readings / Video

Video: Bill Moyers. *Portrait of Addiction*

Optional Readings**Unit 2: Historical, ethical, legal/political, sociological, perspectives****Topics**

- Historical, ethical, legal/political, sociological, epidemiological perspectives on substance use and abuse
 - History of addiction intervention
 - Primary, secondary, and tertiary intervention
 - Interdisciplinary approaches

This Unit relates to course objectives 4.

Required Readings

McNeece, C. A. & DiNitto, D. (2012). *Chemical dependency: A systems approach*. (4th Ed.) Allyn & Bacon. Chapters 7 & 8.

Bostwick J.M. Blurred boundaries: The therapeutics and politics of medical marijuana. *Mayo Clinic proceedings* 87(2): 172-186, 2012.

Optional Readings

Project Cork. Retrieved from <http://www.projectcork.org/bibliographies>

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

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

Unit 3: Understanding the Process of Addiction**Month Day, Year****Topics**

- Understanding the Process of Addiction: Jellinek Chart
 - Definitions
 - DSM 5
 - Etiological Theories
 - Nature
 - Neuropsychology
 - Nurture
 - Learned
 - Self-medication
 - Psychic
 - Trauma
 - Early Attachment Loss
 - Physical
- Ethical practice
- Diversity in practice
- Social Work role identification

This Unit relates to course objectives 4 and 5.

Required Readings

McNeece, C. A. & DiNitto, D. (2012). *Chemical dependency: A systems approach*. 4th Ed. Allyn & Bacon. Chapters 1, 2, and 3

Walant, K. B. (1995). *Creating the capacity for attachment: Treating addictions and the alienated self*. New York: Rowman & Littlefield Publishers, Inc. (classic). Chapters 1, 4 and 6.

<http://www.cars-rp.org/publications/Prevention%20Tactics/PT8.13.06.pdf>

Optional Readings

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

**Unit 4: Understanding How Commonly used Psychoactive Drugs
Work on the Body**

Unit 4: Understanding How Commonly used Psychoactive Drugs Work on the Body

Topics

- Understanding how commonly used psychoactive drugs work on the body
 - Epidemiology: Prevalence, incidence, risk factors
 - Street names, pleasurable effects, paraphernalia, risk of overuse and long-term use

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

Required Readings / Videos

McNeece, C. A. & DiNitto, D. (2012). *Chemical dependency: A systems approach*. 4th Ed. Allyn & Bacon. Chapter 4

Video: *The World's Most Dangerous Drug* (<http://topdocumentaryfilms.com/>)

Video: *Clearing the Smoke: The Science of Cannabis* (<http://topdocumentaryfilms.com/>)

Video: *Drugs, Inc. – Meth* (<http://topdocumentaryfilms.com/>)

Video: (variety of topics and substances) -

<http://www.youtube.com/watch?v=kYiuRyLnZOk&list=PLImletmkNNslnP3wkJFx9bnv2HothoFV>

Students are encouraged to explore information on the various categories of substances on their own by way of conversations, videos, and websites.

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

Optional Readings

Hansen, G., Venturelli, P., & Fleckenstein, A. (2008). *Drugs and society*. 10th Ed. Jones & Bartlett Publishers.

Unit 5: Understanding how commonly used psychoactive drugs work on the body

Topics

- Understanding how commonly used psychoactive drugs work on the body, Continued
 - Epidemiology: Prevalence, incidence, risk factors
 - Street names, pleasurable effects, paraphernalia, risk of overuse and long-term use

This Unit relates to course objectives 4, and 5.

Required Readings

Please see reading from Unit 4.

Unit 6: Levels of Care**Topics**

- Levels of Care
 - Screening (Screening, Brief Intervention, and Referral to Treatment (SBIRT))
 - Assessment
 - Detox
 - Intensive Outpatient Program
 - Residential Treatment
 - Sober Living
 - Relapse Prevention / Maintenance
 - Ongoing Outpatient Treatment
- Continuity of Care (potential impact)
 - Affordable Care Act
 - Public Health vs. Private Care
 - Third-party payers
- Diversity in practice
- Ethical practice
- Engage, assess, intervene, evaluate
- Critical thinking
- Policy practice
- Professional identity
- Interdisciplinary approaches

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

Required Readings

McNeece, C. A. & DiNitto, D. (2012). *Chemical dependency: A systems approach*. 4th Ed. Allyn & Bacon. Chapters 5, 6, 16

<http://www.amersa.org/journal/Volume%2028,%20Number%203.pdf>

<http://www.samhsa.gov/sbirt>

- **Unit 7: Evidence-based / Evidence Informed Intervention Methods**

Topics

- Evidence-based / Evidence Informed Intervention Methods
 - Motivational Interviewing
 - Seeking Safety
 - Illness Management and Recovery
 - Harm Reduction
 - Cognitive Behavioral Therapy
 - Narrative Therapy
 - 12-step communities
- Diversity practice
- Ethical practice
- Critical thinking
- Engage, assess, intervene, evaluate
- Social Work role identity

This Unit relates to course objectives 4, and 5.

Required Readings

Eng, P. (2006-2010). History of Harm Reduction· Provenance and Politics, Part 2. The Journal of Global Drug Policy and Practice.

<http://www.globaldrugpolicy.org/Issues/Vol%201%20Issue%203/History%20of%20Harm%20Reduction.pdf>

Khantzian, E. J., & Albanese, M. J. (2008). *Understanding addiction as self medication*. Lanham, MD: Rowman & Littlefield Publishers, Inc. Chapters 3 & 4.

Najavatis, L. (2001). *Seeking safety: A treatment manual for PTSD and substance abuse*. The Guilford Press.

Miller, W. & Rollnick, S. (2012). *Motivational interviewing: Helping people change*. 3rd edition. The Guilford Press.

Illness Management and Recovery. <http://store.samhsa.gov/product/Illness-Management-and-Recovery-Evidence-Based-Practices-EBP-KIT/SMA09-4463> (all materials are available for free download.)

<http://www.ihra.net> (International Association for Harm Reduction)

www.harmreduction.org (Harm Reduction Coalition)

Motivational Interviewing Treatment Manuals

<http://store.samhsa.gov/product/TIP-35-Enhancing-Motivation-for-Change-in-Substance-Abuse-Treatment/SMA13-4212>

<http://www.integration.samhsa.gov/clinical-practice/motivational-interviewing>

Narrative Therapy

Making empathy books. While this document is meant for working with children, the same principles can be adapted for work with adults.

<http://www.echoparenting.org/wp-content/uploads/2012/07/empathy-book-toolkit.pdf>

http://www.youtube.com/watch?feature=player_embedded&v=rzGK8ySay0

Unit 8: Recovery Intervention with Group Settings Topics

- Recovery Intervention in Group Settings
 - Clinical skills with challenging roles and group dynamics: Engage, assess, intervene, evaluate
- Ethical practice
- Diversity in practice
- Social Work role identification
- Ethical practice
- Diversity in practice
- Social Work role identification

This Unit relates to course objectives 4 and 5.

Required Readings

- Tatarsky, A. (Ed.). (2007). The healing power of groups and the residential therapeutic community. In *Harm reduction psychotherapy: New treatment for drug & alcohol problems*. New Jersey: Jason Aronson. (Chapter 9, pp. 262-309).
- van Wormer, K., & Davis, D. R. (2008). Mutual-help groups: A strengths perspective. In *Addiction treatment: A strengths perspective*. Thomson Belmont, CA: Brooks/Cole. (Chapter 12, pp. 489-520).
- Weegmann, M. (2006). Edward Khantzian interview. *Journal of Groups in Addiction and Recovery*, 1(2), 15-32.

**Unit 9: Assessment and Evidence Based Intervention with People
with Co-occurring Disorders**
Topics

- Assessment and Evidence Based Intervention with People with Co-occurring Disorders
- Ethical practice
- Diversity in practice
- Social Work role identification
- Ethical practice
- Diversity in practice
- Social Work role identification

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

Required Readings

- McNeece, C. A. & DiNitto, D. (2012). *Chemical dependency: A systems approach*. 4th Ed. Allyn & Bacon. Chapter 13

**Unit 10: -Evidence-based Intervention for Early, Transitional,
Ongoing Recovery and Relapse Prevention
-Addiction in the Workplace
-Burnout Prevention and Intervention**

Topics

- Evidence Based Intervention for Early, Transitional, Ongoing Recovery and Relapse Prevention
- Addiction in the Workplace
- Burnout Prevention and Intervention
- Ethical practice
- Diversity in practice
- Social Work role identification
- Ethical practice
- Diversity in practice
- Social Work role identification

This Unit relates to course objectives 4, 5.

Required Readings

- Witkewitz, K., Marlatt, A., & Waker, D. (2005). Mindfulness based relapse prevention for alcohol and substance use disorders, *Journal of Cognitive Psychotherapy*, 19(3) pp. 1-19
- Miller, W., & Rollnick, S. (2002). Motivational Interviewing with couples. In *Motivational interviewing: Preparing People to Change Addictive Behavior*. New York: The Guilford Press. (Chapter 23, pp. 347-361).
- Miller, W., & Rollnick, S. (2002). Perils and possibilities of group-based motivational interviewing. In *Motivational Interviewing: Preparing People to Change Addictive Behavior*. New York: The Guilford Press. (Chapter 25, pp. 377-390)
- SAMHSA. (n.d.). TIP 41: SAMHSA issues group therapy guide for substance use disorders treatment. Retrieved from www.samhsa.gov

Unit 11: Evaluation of Treatment**Topics**

- Evaluation of Treatment
 - Apply research skills to evaluating the prevention of substance use disorders; identify and use evaluation tools for substance use disorders and prevention;
 - Communicate and disseminate evaluation results appropriate to the intended audience
 - Work collaboratively with evaluators/researchers to assess intervention efficacy and effectiveness in all phases of treatment: beginning, middle, and termination.
- Diversity practice
- Ethical practice
- Critical thinking
- Social Work role identity

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

Required Readings**Unit 12: Recovery with Families****Topics**

- Recovery with Families
- Ethical practice
- Diversity in practice
- Social Work role identification
- Ethical practice
- Diversity in practice
- Social Work role identification

This Unit relates to course objectives 4, 5.

Required Readings

McNeece, C. A. & DiNitto, D. (2012). *Chemical dependency: A systems approach*. (4th Ed.) Allyn & Bacon. Chapter 10

Optional Readings

Brown, S., & Yalom, I. (1997). *Treating alcoholism*. Jossey-Bass.

Unit 13: Evidence-based Intervention with Special Populations**Topics**

- Evidence-based Intervention with Special Populations
 - Impact of stigma and shame
- Ethical practice
- Diversity in practice
- Social Work role identification
- Ethical practice
- Diversity in practice
- Social Work role identification
-

This Unit relates to course objectives 1, 2, and 5.

Required Readings

McNeece, C. A. & DiNitto, D. (2012). *Chemical dependency: A systems approach*. (4th Ed.) Allyn & Bacon. Chapters 9, 11, 12, 14, and 15

Recovery Management

<http://www.bhrm.org/papers/BHRM%20primer.pdf>

-Variety of readings across populations

Optional Readings

Blume, A. & Lovato, L. (2010). Empowering the disempowered: harm reduction with racial/ethnic minority clients, *Journal of Clinical Psychology*. 66(2) 189-200.

White Bison, Inc. (2006). *The red road to wellbriety: In the Native American way*. White Bison, Inc.

Unit 14: Evidence-based Intervention with Special Populations**Topics**

- Evidence-based Intervention with Special Populations, Continued
- Ethical practice
- Diversity in practice
- Social Work role identification
- Ethical practice
- Diversity in practice
- Social Work role identification

This Unit relates to course objectives 4 and 5.

Required Readings

McNeece, C. A. & DiNitto, D. (2012). *Chemical dependency: A systems approach*. (4th Ed.)
Allyn & Bacon. Chapter 16

Unit 15: Wrap-up; Student Evaluations**Topics**

- Wrap-up
- Student Evaluations

STUDY DAYS / NO CLASSES**FINAL EXAMINATIONS**

University Policies and Guidelines

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 (xxx@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 that 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.

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	
City Center	Front of Building (12 th & Olive)	Orange County	Faculty Parking Lot
MRF	Lot B	San Diego	Building Parking Lot
SWC	Lot B	Skirball	Front of Building
VKC	McCarthy Quad		
WPH	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 (OPTIONAL)

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 well-being 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 the chair of the sequence, xxx or concentration, xxx. If you do not receive a satisfactory response or solution, contact your advisor or Dr. Paul Maiden, Vice Dean and Professor of Academic and Student Affairs, at rmaiden@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 for further guidance

XVIII. TIPS FOR MAXIMIZING YOUR LEARNING EXPERIENCE IN THIS COURSE (OPTIONAL)

- ✓ 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.

Don't procrastinate or postpone working on assignments.
