

Addictions Counseling

COU 6667-Y |

Total Credit Hours: 3 Lecture

Classroom:

Instructor

Course Description:

This course will address substance use and other addictive disorders within the context of an integrative biopsychosocial approach to counseling. The course will consider contemporary treatment issues in psychopharmacology; alcoholism, substance abuse and dependence; and addictive behaviors, such as eating disorder and pathological gambling.

Course Rationale/Purpose of this Course:

The purpose of this course is to provide students with an understanding of drug and alcohol counseling. The course is designed to examine theories and techniques of drug and alcohol counseling; sources of help and information in the field; methods of drug and alcohol counseling, assessment; and program planning. Both theory and the practical application of drug and alcohol counseling will be explored through lectures, class discussions, readings, writings, and projects. Ethical and legal issues, contemporary trends, and application of drug and alcohol counseling models to a variety of populations in school and community settings will be explored.

Learning Objectives:

- Demonstrate knowledge of Federal and State regulations regarding confidentiality as it relates to chemical dependency
- Demonstrate knowledge of the various treatment modalities including self-help groups, psychotherapies (e.g. Cognitive, Reality Therapy, REBT), both inpatient and outpatient treatment programs and their implications for treatment and, specifically, prevention.
- Evaluate screening of psychological, social and physiological signs and symptoms of alcohol and other drug use.
- Identify special issues affecting minority populations in the prevention, identification and treatment of chemical dependency.
- Display a fundamental understanding of the functional, biological, developmental, and environmental factors surrounding addiction and substance use disorder and of the connection between trauma and addiction.
- List the characteristic symptoms of intoxication and withdrawal from: alcohol, opiates, cannabis, amphetamines, cocaine, hallucinogens, and the major and

minor tranquilizers.

- Identify special issues in adolescent treatment of chemical dependency.
- Describe the addictive process as it affects family structure and the roles characteristically assumed by family members in the presence of addiction.
- Apply counseling techniques to assist the student, client, and/or family in examining the student's behavior, attitudes, and/or feelings if appropriate in the treatment planning and referral in accordance with diversity issues.
- Demonstrate knowledge of special issues and circumstances in alcohol and drug counseling such as crisis intervention, specific cultural issues, professional ethics and health-related issues such as AIDS, STDs, and chronic conditions associated with alcoholism and other drug use disorder.
- Display skill and knowledge in alcohol and drug use disorder treatment through group processes.

Prerequisites:

Admission to the Master's Program in the specialty area of Clinical Mental Health, Marriage and Family Therapy, or School Counseling.

Instructional Materials:

- American Counseling Association (2014). Code of Ethics. West Alexandria, VA: Author. *Available on-line from www.counseling.org
- American Psychological Association. (2020). Publication manual of the American Psychological Association 2020: the official guide to APA style (7th ed.). American Psychological Association.
- Capuzzi, D. & Stauffer, M. (2016). Foundations of Addictions Counseling, (4th ed.) Columbus, OH: Pearson Education. (ISBN: 978-0-135166932)
- Mee-Lee, D. Shulman, G., Fishman, M., Gastfriend, D., Miller, M. (2013). The ASAM Criteria, (4th ed.) Chevy Chase, Maryland: American Society of Addiction Medicine.
- National Association for Alcoholism and Drug Abuse Counselors. (2016). Ethical standard of alcoholism and drug abuse counselors.

Methods of Instruction:

- Interactive lecture
- Discussion
- Case Study
- Demonstration
- Audio-visual recording and presentation
- Group Work
- Dyadic work and role play
- Student presentation
- Computer application

- Research and analysis
- Written assignments
- In-class exercise
- Personal reflection

***Required practices in this course include reading, researching, writing, class discussion, class assignments, and experiential/group assignments.

Methods of Evaluation:

Academic Standards:

CACREP Standards 2016

Learning Tasks & Activities/Assignments/Assessments

CACREP Standards	Learning Objective	Assignment	Assessment
5.A.1.a. History and development of addiction counseling 5.A.1.b. Theories and models of addiction related to substance use as well as behavioral and process addictions 5.A.1.d. Principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning 5.A.2.C. factors that increase the likelihood for a person, community, or group to be at risk for or resilient to psychoactive substance use disorders 5.A.3.d. Techniques and interventions related to substance abuse and other addictions 5.C.2.e Potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders 5.D.2.g potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders 5.D.1.e Neurobiological and medical foundation and etiology of addiction and co-occurring disorders 5.D.2.j j. Effects of co-occurring disorders 5.D.2.j j. Effects of co-occurring disabilities on the client and family 5.F.2.h Impact of addiction on marriages, couples, and families	Understanding the history and development of addictions counseling along with the identification of specific models and techniques. Contemporary models and interventions of addictions treatment are highlighted and compared to earlier models.	Students will select two theories of addiction to compare and contrast from a list provided by the instructor. Students will cite a minimum of 3 peer-reviewed references (not including the textbook) for each model used. Students will identify the underlying philosophy, models, and techniques derived from the two theories. In addition, students will end the compare/contrast by identifying their own personal theory of addiction, explaining how their approach would be effective in working with clients.	Students will write an addiction theory compare/contrast paper. Measures of performance for the assigned task/activity will be measured using the following rubric: The paper will be assigned up to 100 points provided that the student identifies the following for each theory: 0-20 points: Underlying Philosophy (or Worldview) 0-30 points: Quality of the student's compare/contrasting of relevant material 0-30 points: Identification of models/concepts associated with the Theory 0-20 points: Identification of techniques associated with the Theory
CACREP Standards	Learning Objective	Assignment	Assessment

5.A.1.c. Principles and philosophies of addiction-related self-help 5.A.2.f. Role of wellness and spirituality in the addiction recovery process 5.C.1.d Neurobiological and medical foundation and etiology of addiction and co-occurring disorders	Understanding the history, philosophy and principles of Twelve Step Programs along with its impact on contemporary applications of addiction treatment. Discuss the role and function of spirituality in relation to addictions treatment. Literature review on Twelve Step history, philosophy, and principles; Assessment of a Twelve Step Group.	*Students will write a research paper discussing Twelve Step Programs. As part of this research, students will attend a Twelve Step meeting. Students may choose a group on process/behavioral addiction (ex: Gamblers Anonymous) or substance (ex: Alcoholics/Narcotics Anonymous) addiction. After attending the meeting students are to write a paper including information relative to the history, philosophy, and principles of Twelve Step programs in context of the information learned from the literature review and present this information in class.	Students will conduct a literature review on the history, philosophy, and principles of Twelve Step programs then provide an in-class presentation outlining their research. Deliverables include a paper & a presentation. The project will be assigned up to 100 points provided that the student complete the following: 0-40 points: Describing the history, philosophy and principles of 12 Step Programs 0-30 points: Identifying and describing the role of spirituality in the addiction recovery process 0-15 points: Quality of the student's presentation of relevant material in class 0-15 points: Quality of the student's command of relevant literature and integration of the
			of relevant literature
CACREP Standards	Learning Objective	Assignment	Assessment
 5.A.2.a. roles and settings of addiction counselors 5.A.c. principles and philosophies of addiction-related self-help 5.A.1.e. Neurological, behavioral, psychological, physical, and social effects of psychoactive substances and addictive disorders on the 	Understanding the treatment process from chemical dependency professional via field interview. Discuss applicable models and	Students will interview a professional in the field of chemical dependency. The purpose of the interview is to gain information about the methods and processes	Students will write a paper based on their field interview with a professional then prepare to discuss their experiences & findings with the class.

user and significant others **Standard 5.A.1.f.** Tests and
assessments specific to addiction
counseling

5.A.3.a. Screening, assessment, and testing for addiction, including diagnostic interviews, mental status examination, symptom inventories, and psychoeducational and personality assessments

5.A.3.b. Assessment of biopsychosocial and spiritual history relevant to addiction **5.A.3.c.** Assessment for symptoms of psychoactive substance toxicity, intoxication, and withdrawal **Standard 5.A.3.e.** Strategies for reducing the persisting negative effects of substance use, abuse, dependence, and addictive disorders

5.A.2.a. Roles and settings of addiction counselors

5.A.2.b. Potential for addictive and substance use disorders to mimic and/or co-occur with a variety of medical and psychological disorders **5.A.2.c.** Factors that increase the

likelihood for a person, community, or group to be at risk for or resilient to psychoactive substance use disorders

5.A.2.d Regulatory processes and substance abuse policy relative to service delivery opportunities in addiction counseling

5.A.2.e. Importance of vocation, family, social networks, and community systems in the addiction treatment and recovery process

5.A.2.h. Classifications, indications, and contraindications of commonly prescribed psychopharmacological medications for appropriate medical referral and consultation 5.A.2.i. Diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD)

interventions associated with addiction treatment. Discuss the effects of psychoactive substances and its relationship with neurotransmission and detoxification. Discuss the significance of family treatment relative to addiction treatment Discuss various methods used to assess. diagnose and treat substance use disorder. Discuss credentialing, the application of ethics codes and Federal regulations associated substance use disorder treatment. Discuss record keeping procedures relative to the treatment of substance use disorder.

used for drug and alcohol counseling within their agency. Students will summarize their experience with the professional in a written paper and presented during class via discussion forum. You will be given a list of questions to ask your respective chemical dependency professional during your field interview.

The project will be assigned up to 100 points provided that the student identifies the following:

0-40 points: Describing the professional's assessment methods, treatment methods, & outcome goals for treating individual clients. 0-30 points: Describing the protocol of the agency in the treatment of individual clients. 0-30 points: Quality of the student's presentation of relevant material in class

 5.A.2.j. Cultural factors relevant to addiction and addictive behavior 5.A.2.k. Professional organizations, preparation standards, and credentials relevant to the practice of addiction counseling 5.A.2.l. Legal and ethical considerations specific to addiction counseling 5.A.2.m. Record keeping, third party reimbursement, and other practice and management considerations in addiction counseling 			
CACREP Standards	Learning Objective	Assignment	Assessment
5.A.2.g. Culturally and developmentally relevant education programs that raise awareness and support addiction and substance abuse prevention and the recovery process 5.A.3.f. strategies for helping clients identify the effects of addiction on life problems and the effects of continued harmful use or abuse, and the benefits of a life without addiction 5.A.3.g. evaluating and identifying individualized strategies and treatment modalities relative to clients' stage of dependence, change, or recovery Standard 5.A.3.h. strategies for interfacing with the legal system and working with court referred clients 5.G.2.i. Signs and symptoms of substance abuse in children and adolescents as well as the signs and symptoms of living in a home where substance use occurs.	The development of a comprehensive alcohol and drug prevention program. Evaluating essential components of a drug prevention program. Identifying and understanding stages of social, emotional, and cognitive development of various youth in the development of an alcohol and drug prevention program. Include the signs and symptoms of substance abuse in children and adolescents and the signs and symptoms of living in a home where substance abuse occurs.	Students will identify the features of a comprehensive prevention program and use them to devise a substance use prevention program for use in elementary, middle, or high schools in their district. Questions to consider for your program: Who would facilitate the program? Would family members be included? What educational activities would be used? Students will present their program via PowerPoint presentation along with applicable handouts and discuss during class.	Students will create a presentation with handouts outlining the features of a comprehensive substance use prevention program for use in K-12 schools. The project will be assigned up to 100 points provided that the student identifies the following: 0-30 Points: comprehensive rationale for the program (including a review of relevant literature) 0-20 Points: Target population and screening processes for the program proposed 0-20 Points: Goals and objectives for the program and outcome measures used 0-20 Points: Explanation of theories and techniques to be used during sessions/meetings 0-10 Points: Format of meetings: Length,

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			duration and structure of sessions/meetings
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^{***}Note: In selecting a group to attend, students are to attend meetings that are classified as "open," meaning new members are welcome. Students are to respect the confidentiality of persons in the meeting and are not to share the identity or any identifying information about the members in the meeting. Additional discussion about professional and ethical issues attending Twelve Step groups will occur in class.

MC Syllabus Statement:

The MC Syllabus contains all policies and procedures that are applicable to every course offered by Mississippi College, both on campus and online. The policies in the MC Syllabus describe the official policies of the University as they relate to instruction and will take precedence over those found elsewhere. It is the student's responsibility to read and be familiar with every policy. The MC Syllabus may be accessed at any time on the MC website at the following: https://www.mc.edu/provost/mcsyllabus.

Grading Policy:

My goals are to (1) meet the course objectives and (2) ensure fairness. Accordingly, please do not contact the instructor at the end of the course to request an extra assignment, bonus opportunity, or grade change for any reason except an error in the calculation of the final grade. Grade appeals should follow the process outlined in MC Policy 4.20.

Course grade will be calculated as follows:

25% Theory Paper

20% Twelve Step Group Meeting & Literature Review Presentation

15% Field Interview

20% Comprehensive Alcohol and Drug Prevention Program Presentation

20% Exams (2)

Course grades are given as letter grades as follows:

94 - 100 = A

88 - 93 = B +

82 - 87 = B

76 - 81 = C+

70 - 75 = C

60 - 69 = D

0 - 59 = F

Additional Course Policies:

<u>Electronic Devices:</u> Ringing and beeping devices are expected to be set on vibrate or silent during class time to reduce disruption and distractions. Additionally, such devices are not to be used during class. Recording of lectures are permitted but with the written request and permission of the instructor.

<u>Attendance</u> -Attendance is taken at the beginning of class. Class attendance is an essential part of college education, and students are <u>expected to attend regularly and</u> punctually. Individuals learn through active participation and involvement. There will be experiential components of this course. Cumulative absences may result in a lowered grade or loss of credit for the course. The university policy will be followed concerning absences.

- A student will receive an F in a class immediately when absences, whether excused or unexcused [including university functions], exceed 25% of the class meetings. Cumulative absences/nonparticipation may result in a lowered grade or loss of credit for the course. Tardiness is also subject to penalty, as is any failure to complete required class work on time. For lesser numbers of absences/non-participation, the student should expect a lowered grade in the course, with the maximum penalty of one letter grade for each week of absences (in a semester) or the equivalent. The calculation of the semester grade, including any penalty for absences, is at the discretion of the faculty member and may vary according to the nature of the course and the grading scale used. In some classes, points will be deducted from the semester grade for unexcused absences; in others, the penalty may be built into the grading scale by means of frequent pop quizzes, grades for class participation, etc.
- The faculty member may excuse a limited number of absences/non-participation for serious illness, for field trips, for representing the University, and for other emergency reasons which the faculty member finds justifiable.
- Whether an absence/non-participation is excused or not, the student who is absent misses some learning that takes place in the class. Naturally, the faculty member is more inclined to assist the student in making up the work if the absence was excused. However, the responsibility for work missed rests entirely with the student.
- A student registering late will be charged for all absences/non-participation occurring prior to his or her reporting to class, although these may be treated as excused absences.
- The last day to drop a course for the semester is listed in the current class bulletin. Please follow the university policy as outlined relative to dropping a class.
- Make-Up Tests Making up tests are strongly discouraged. Make-up tests will

only be given if a student has an excused absence. This applies to **in class exams**: If you miss class, whether excused or unexcused, you must be prepared to take the scheduled in-class exam(s) on the night you return to class. The only exam considered for make-up is from the night of the class you missed, not the night of class you return. This applies to **online exams**: online exams missed while online will not be reopened/made up.

- Expectations for Written Assignments All written assignments are due on the date stated on the course schedule and must be submitted on the date in which they are due. Unexcused late papers will be subjected to a 5% grade reduction per day
- Papers must meet graduate-level standards for quality of writing, including grammar, spelling, sentence structure, syntax, paragraph construction and APA Style. I strongly encourage each student to use the University's Writing Center for all written assignments. Do not delay when utilizing this very helpful option.
- Plagiarism is a very serious offense. To avoid it you must document any and all source materials according to APA standards. Failure to use proper references and/or citations constitutes plagiarism, and the sanction for any act of plagiarism is a failing grade on the assignment. Additional sanctions are possible. See the University's Academic Integrity Policy referenced in this document and found online.

Best Practices

Class Attendance and Participation:

It is essential that you come to class having completed the reading assignments, ask questions, pose hypotheses, and debate the issues we study in general. Students are expected to engage in intelligent discussion of the assigned topic in all areas (Discussion Board Activities, Chats, Forums, Shared Papers, etc.) to help process course material or to demonstrate understanding of the material.

<u>Course Outline / Schedule</u> Date Reading/Topics Assignments/Tasks Due

Week1: Introduction to Addiction Counseling

Week 2: History and Etiological Models of Addiction

Week 3: Substance Addictions

Week 4: Process Addictions 12-Step meeting/lit review & presentation due

Week 5: Professional Issues in Addiction Counseling

Week 6: Introduction to Assessment **Exam #1**

Week 7: Assessment & Diagnosis of Substance-Related and Addictive Disorders

Week 8: Motivational Interviewing & Psychotherapeutic Approaches

Week 9: Tx of Comorbid Disorders Theory paper due

Week 10: Group Counseling for Treatment of Addictions

Week 11: Addiction Pharmacotherapy Field interview due

Week 12: 12-Step Facilitation; Maintenance and Relapse Prevention

Week 13: Substance Addiction & Families Exam # 2

Week 14: Persons with Disabilities & Substance Related and Addictive

Disorders A & D Prevention program group presentation due)

Week 15: Substance Abuse Prevention Programs Across the Life Span;

Cross cultural Counseling: Engaging Ethnic Diversity

Disclaimer:

The instructor reserves the right to modify the schedule proposed in the syllabus as necessary. Modifications will be provided in writing.

Bibliography:

Counseling - general information, issues and skills:

Cormier, L., Nurius, P., and Osborn C. (2012). *Interviewing and Change Strategies for Helpers*. Florence, KY: Brooks/Cole.

Egan, G. (2013). The Skilled Helper (10th ed.). Florence, KY: Brooks/Cole.

Ivey, A., Gluckstern, N., & Ivey, M. (2014). *Basic Attending Skills (5th ed.)*. Amherst, MA: Microtraining Associates.

Marlatt, G. (ed.). (2002). Harm Reduction: Pragmatic Strategies for Managing High Risk Behavior. New York, NY: Guilford Press.

Assessment:

Diagnostic and Statistical Manual (DSM-V). (2013). Arlington, VA: American Psychiatric Association.

Family Issues:

Karr-Morse, R., and Wiley, M. (2014.) Ghosts from the Nursery: Tracing the Roots of Violence. Boston, MA: Atlantic Monthly Press.

Wegscheider-Cruse, S. (1994). Family Reconstruction: The Living Theater Model. Palo alto, CA: Science & Behavior Books.

Addiction and Recovery:

Beck, A.T., Wright, F.D., Newman, C.F., & Liese, B.S. (2001). *Cognitive therapy of substance abuse*. New York: The Guilford Press.

Benshoff, J.J., & Janikowski, T.P. (2000). *The rehabilitation model of substance abuse counseling*. Belmont, CA: Wadsworth/Thomson Learning.

Brown, M. (2001). A psychosynthesis twelve step program for transforming consciousness: Creative explorations of inner space. *Counseling and Values*, 45,

- Fisher, G. and Harrison, T. (2009). Substance Abuse: Information for School Counselors, Social Workers, Therapists, and Counselors. Boston, MA: Pearson: Allyn and Bacon.
 - Ellis, A., McInerney, J.F., DiGiuseppe, R., & Yeager, R.J. (1988). Rational-Emotive therapy with alcoholics and substance abusers. New York: Pergamon Press.
- Gorski, T. (1989). Passages Through Recovery. Philadelphia, PA: Harper & Row.
- Hester, R.K., & Miller, W.R. (2002). Handbook of alcoholism treatment approaches (3rd ed.). Boston: Allyn & Bacon.
- Johnson, L.D., O'Malley, P.M. and Bachman, J.G. (2001). Monitoring the future national results on adolescent drug use: Overview of key findings 2000. (NIH Publication NO 01-4923). Bethesda, MD: National Institute on Drug Abuse.
- Hester, R.K., & Miller, W.R. (2003). Handbook of alcoholism treatment approaches: Effective alternatives. (3rd ed.). Boston: Allyn & Bacon.
- Kinney, J., and Leaton, G. (1995). Loosening the Grip: A Handbook of Alcohol Information. Mosby, MO: Mosby Publishing.
- Ringwald, C.D. (2002). The soul of recovery: Uncovering the spiritual dimension in the treatment of addictions. New York: Oxford University Press.

Intervention:

- Katz, E.C., Sears, E.A., Adams, C.A. and Battjes, R.J. (2003). *Group-based treatment for adolescent substance abuse*. Bloomington, IL: Chestnut Health Systems (Online). Available: www.Chestnut.org/li/bookstore.
- Monti, P.M., Colby, S.M. and O'Leary, T.A. (Eds.) (2001). Adolescents, alcohol and substance abuse: Reaching teens through brief intervention. New York, NY: Guildford.
- Schaeffer, D. (1987). *Choices and Consequences*. Minneapolis, MN: Johnson Institute QVS, Inc.

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