GENERAL INTRODUCTION AND COURSE OVERVIEW
This course focuses on various approaches to the evidence-based evaluation, intervention, measurement, treatment and relapse prevention of common addictive disorders, including those resulting from substance misuse, problem gambling, and compulsive overeating or sexual behavior. Students will learn to evaluate the bio-pscho-social etiological factors that bear on the formation of addictive behavior patterns, as well as erroneous thinking patterns and cognitive triggers that lead to habituating these patterns over time. This course will instruct students on utilizing measures for screening, conducting diagnostic evaluations using motivational interviewing, formulating a treatment plan, and conducting session-by-session treatment for various DSM-IV-based addictive disorders. Students will also learn necessary components for post-treatment relapse prevention and considerations in pre-treatment intervention. The course will also examine the impact of age, race, gender, social class, culture, ethnicity, spirituality, religion, sexual orientation, national origin, and physical and mental ability on recovery from addictive disorders.

Prerequisites: 19:910:571, and pre- or corequisite: 19:910:511.

Note: This is the five-day weekend version of the 15-week course. Each day encompasses the material in three classes.
COURSE OBJECTIVES

Knowledge:
1. Evaluate the evidence-based risk factors that bear on the identification, evaluation and treatment of addictive disorders.

2. Learn to select and effectively utilize instruments and other measurement tools for screening for DSM-IV-based addictive disorders.

3. Evaluate the relationship of motivation and stages of change in the recovery process.

4. Incorporate a holistic evaluation of etiology, comorbidity, motivation, and cognitive belief structures into a formalized treatment plan.

5. Evaluate considerations regarding age, race, gender, social class, culture, ethnicity, spirituality, religion, sexual orientation, national origin, and physical and mental ability into treatment planning.

6. Engage in effective clinical practice in keeping with current best practices and social work ethics and values.

Values:
1. Understand the biological, familial and societal factors underlying addictive disorders and their relevance to social work prevention, intervention and evidence-based practice.

2. Examine the effect of age, race, gender, social class, culture, ethnicity, spirituality, religion, sexual orientation, national origin, and physical and mental ability on client readiness or reticence to attend treatment and pursue successful recovery.

3. Identify the societal values that stigmatize individuals with addictive disorders and serve as an impediment to recovery and evaluate the strategies to counteract such stigma from a systems perspective.

Skills:
1. Conduct effective screening for disorder and comorbidity, including learning DSM-IV criteria, selecting appropriate measurement tools and evaluating factors relevant to successful recovery.

2. Utilize motivational interviewing and evaluation of stages of change to determine the optimal treatment approach for individual clients.
3. Conduct a thorough assessment of triggers, attitudes, erroneous beliefs and other factors necessary to formulate an effective treatment plan.


5. Learn to adapt treatment techniques to various addictive behaviors and individual client needs.

6. Accomplish 1-5 in keeping with current best practices for addictive behaviors as well as for social work ethics and values.

The school-wide learning goal for the School of Social Work is:

To prepare students for practice and leadership roles in the fields of social work and social welfare. This goal is operationalized using three of the ten Council on Social Work Education (CSWE) prescribed competencies. These competencies are as follows:

1. Identify as a professional social worker and conduct oneself accordingly;
2. Apply knowledge of human behavior and the social environment; and
3. Apply critical thinking to inform and communicate professional judgment.

BIBLIOGRAPHY (COURSE TEXT AND READINGS)

Required Texts


**Required Readings (in Sakai library)**
- Alcohol abuse/dependence
- Pathological gambling
- Binge eating (provisional)


- Chapter 1: The addiction cycle
- Chapter 2: The levels of addiction
- Note: These chapters are for review; were required in the prerequisite class.

- Chapter 3: Assessment
- Chapter 4: Treatment Planning

- Chapter 2: Assessment and treatment planning (pp. 32-54).
- Chapter 5: Maintaining change in substance use behaviors (pp. 105-124).
- Chapter 6: Working with Families (pp. 126-148).

- Chapter 6: Treatment-Related issues (pp. 110-149).


**CLASS FORMAT**
This course consists of readings, lectures, discussions, dyad and case study work, reports, and papers. All papers should be single spaced, written in 12-pint type with one-inch margins.
COURSE REQUIREMENTS AND EVALUATION CRITERIA

- Students will write three (3) write-ups, based on observations at open 12-step meetings of Alcoholics Anonymous (AA), Adult Children of Alcoholics (ACOA), Al-Anon, Narcotics Anonymous (NA), Gamblers Anonymous (GA), Gam-anon, Sexaholics Anonymous (SA), Overeaters Anonymous (OA), and/or Eating Disorders Anonymous (EDA). Students must attend different meetings (i.e. not the same weekly group) and, ideally, one meeting from each of three disorders. Reports should be two (2) to three (3) pages; use the template “Self-Help Write-Up” provided in the Resources section. Total: Three (3) units.

- Students will complete one Psychiatric Assessment (psychosocial history), based on either: (a) a client the student is working with in practicum or; (b) a client in an episode of “Intervention” on A&E TV. The assessment should follow the format provided in the readings and should be 6 to 8 pages long. Students may use the psychiatric assessment completed in the Understanding Addictive Behaviors course, the prerequisite for this class, or write a new assessment. Total: One (1) unit.

- Students will write a dialogue between counselor and client, displaying the use of motivational interviewing techniques. The dialogue should be two (2) to three (3) pages. Total: One (1) unit.

- Students will submit a cognitive formulation, detailing the issues they would address in 8 sessions of therapy, including automatic thoughts, core beliefs, situational triggers, and related feelings. The submission should be two (2) to three (3) pages. Total: One (1) unit.

- Students will submit a treatment plan, consisting of in-session and homework assignments for the client to complete across treatment sessions. The assignments should be two (2) to three (3) pages. Total: One (1) unit.

Each unit is graded as Pass/Fail. To Pass a unit, the student must obtain a score of 70% or above. Final grades will be based on the total number of “Pass” grades for the semester.

A=7 passes
B=6 passes
C=5 passes
Fail=4 passes and below

Students must complete all assignments to receive credit in the course.

Class Participation, Attendance, and Make-Up Policy:

Students are expected to participate meaningfully in class. At the instructor’s discretion, students who further discussion or otherwise enrich the learning experience beyond what is required may receive a half-step improvement in their grade (i.e. from B to B+, from C to C+ etc.). Conversely, students who are often late for, or disruptive in class or who fail to participate actively in class discussion may receive a half-step reduction in grade (i.e. from B to C+ etc.).
Attendance in class is in a weekend class is required. In case of an excused absence (see below), students may only miss half-day or they will need to retake the class in a subsequent semester. Out of respect for other classmates, the instructor will not permit students to come in late (i.e. more than 10 minutes after the start of class) or leave early without making prior arrangements with the instructor. All absences are unexcused except those that involve an emergency (e.g. hospitalization, death of immediate family members, accidents or other unforeseen emergency events). All emergency excused absences must be arranged with and receive approval from the instructor prior to missing class. Students will be required to provide documentation for excused absences.

Assignments should be uploaded to Sakai on the due date. No late assignments will be accepted. Please do not email the instructor with extenuating circumstances if your assignment is not in the drop box by the closing date. When submitting materials, please follow this procedure: (a) upload your document to the drop box; (b) print out the confirmation that documents that you have properly uploaded; and (c) check to make sure your paper is showing up as submitted. If you either don’t get a confirmation or can’t see your paper, attempt to upload again and follow the above procedure. If you are still having problems, email the instructor for assistance.

Note: If you wait until the last day to upload your paper and encounter problems, understand that the instructor may not be immediately available to assist you. Therefore, if your paper isn’t uploaded by the time the submission period ends, your paper will not be accepted. It is, therefore, advisable not to wait until the last day to submit. If you have followed all the above procedures and the instructor cannot retrieve your paper, you will need to supply the confirmation as proof that your paper was, in fact, submitted during the submission period.

ACADEMIC INTEGRITY

All work submitted in a graduate course must be your own.

It is unethical and a violation of the University’s Academic Integrity Policy to present the ideas or words of another without clearly and fully identifying the source. Inadequate citations will be construed as an attempt to misrepresent the cited material as your own. Use the APA citation style which is described in the Publication manual of the American Psychological Association, 6th edition.

Plagiarism is the representation of the words or ideas of another as one’s own in any academic exercise. To avoid plagiarism, every direct quotation must be identified by quotation marks or by appropriate indentation and must be properly cited in the text or footnote. Acknowledgement is required when material from another source is stored in print, electronic, or other medium and is paraphrased or summarized in whole or in part in one’s own words. To acknowledge a paraphrase properly, one might state: “to
paraphrase Plato’s comment...” and conclude with a footnote identifying the exact reference. A footnote acknowledging only a directly quoted statement does not suffice to notify the reader of any preceding or succeeding paraphrased material. Information which is common knowledge, such as names of leaders of prominent nations, basic scientific laws, etc., need not be footnoted; however, all facts or information obtained in reading or research that are not common knowledge among students in the course must be acknowledged. In addition to materials specifically cited in the text, only materials that contribute to one’s general understanding of the subject may be acknowledged in the bibliography. Plagiarism can, in some cases, be a subtle issue. Any question about what constitutes plagiarism should be discussed with the faculty member.

Plagiarism as described in the University’s Academic Integrity Policy is as follows: “Plagiarism: Plagiarism is the use of another person’s words, ideas, or results without giving that person appropriate credit. To avoid plagiarism, every direct quotation must be identified by quotation marks or appropriate indentation and both direct quotation and paraphrasing must be cited properly according to the accepted format for the particular discipline or as required by the instructor in a course. Some common examples of plagiarism are:

- Copying word for word (i.e. quoting directly) from an oral, printed, or electronic source without proper attribution.

- Paraphrasing without proper attribution, i.e., presenting in one’s own words another person’s written words or ideas as if they were one’s own.

- Submitting a purchased or downloaded term paper or other materials to satisfy a course requirement.

- Incorporating into one’s work graphs, drawings, photographs, diagrams, tables, spreadsheets, computer programs, or other noncontextual material from other sources without proper attribution”.

Plagiarism along with any and all other violations of academic integrity by graduate and professional students will normally be penalized more severely than violations by undergraduate students. Since all violations of academic integrity by a graduate or professional student are potentially separable under the Academic Integrity Policy, faculty members should not adjudicate alleged academic integrity violations by graduate and professional students, but should refer such allegations to the appropriate Academic Integrity Facilitator (AIF) or to the Office of Student Conduct. The AIF that you should contact is Antoinette Y. Farmer, 848.932.5358. The student shall be notified in writing, by email or hand delivery, of the alleged violation and of the fact that the matter has been referred to the AIF for adjudication. This notification shall be done within 10 days of identifying the alleged violation. Once the student has been notified of the allegation, the student may not drop the course or withdraw from the school until the adjudication process is complete. A TZ or incomplete grade shall be assigned until the case is
resolved. For more information regarding the Rutgers Academic Integrity Policies and Procedures, see: http://academicintegrity.rutgers.edu/academic-integrity-at-rutgers.

It has been recommended by the Office of Student Conduct that the honor pledge below be written on all examinations and major course assignments.

To promote a strong culture of academic integrity, Rutgers has adopted the following honor pledge to be written and signed on examinations and major course assignments submitted for grading: **On my honor, I have neither received nor given any unauthorized assistance on this examination.**

**DISABILITY ACCOMMODATION**

Please Note: Any student who believes that s/he may need an accommodation in this class due to a disability should contact the University Office of Disability Services, Lucy Stone Hall, Livingston Campus 54 Joyce Kilmer Avenue, Suite A145, Piscataway, NJ 08854-8045, email address: dsoffice@rci.rutgers Phone: (848) 445-6800, fax: (732) 445-3388, for a letter of accommodation. (Undergraduate New Brunswick students should contact the Coordinator for Students with Disabilities for their College.) Students who are taken courses in Camden should contact Mr. Tim S. Pure, Assistant Director/Disability Services Coordinator, Rutgers-Camden Learning Center, Armitage Hall, Room 231, 311 N. 5th Street, Camden, NJ 08102, email address: tpure@camden.rutgers.edu. Students who are taken courses in Newark should contact Ms. Genevieve Sumski, Disability Services Coordinator, Robeson Campus Center-Newark, 350 ML King, Jr. Boulevard, Newark, NJ 07102-1898. Any student, who has already received a letter of accommodation, should contact the instructor privately to discuss implementation of his/her accommodations immediately. Failure to discuss implementation of accommodations with the instructor promptly may result in denial of your accommodations.

**COURSE OUTLINE**

Following are the dates, topics and assigned chapters in required text. Other reading assignments will be provided on a weekly basis.

<table>
<thead>
<tr>
<th>Date</th>
<th>Topic</th>
<th>Content and Assignments</th>
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<tbody>
<tr>
<td>Day 1 Morning</td>
<td>Intro, Stages of Change</td>
<td>DiClementi, Chs. 1-5 (text, Powerpoint)</td>
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<tr>
<td></td>
<td>- Stages in acquiring an addiction</td>
<td>1. Models of addiction and change</td>
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<td>2. The process of human intentional behavior change</td>
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<td>3. The well-maintained addiction: An ending and a beginning</td>
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<td>4. Exploring the precontemplation, contemplation and preparation stages of becoming addicted</td>
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<td>Time</td>
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<td>Reading Material</td>
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<tr>
<td>Afternoon</td>
<td>Stages of Change</td>
<td>DiClementi, Chs. 6-10 (text, Powerpoint)</td>
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<td>• Stages in recovery</td>
<td>6. Precontemplation for recovery: Cultivating seeds for change</td>
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<td>• Assessment of stages of change</td>
<td>7. The decision to change: Moving from the contemplation to the preparation stage of recovery</td>
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<td>8. Preparing for action: Creating a plan</td>
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<td>9. Taking action to change an addiction</td>
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<td>10. The long haul: Well-maintained recovery</td>
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<td>Assessment instruments (Sakai Library):</td>
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<td>SOCRATES, URICA</td>
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<td>Feb. 2</td>
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<td>In Class: Role play, client interview</td>
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<tr>
<td>Day 2: Morning</td>
<td>Motivational Interviewing</td>
<td>Miller &amp; Rollnick, Chs. 1-5</td>
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<td>1. Why Do People Change?</td>
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<td>2. Ambivalence: The Dilemma of Change</td>
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<td>3. Facilitating change</td>
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<td>4. What is Motivational Interviewing?</td>
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<td>5. Change and Resistance: Opposite Sides of a Coin</td>
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<td>In Class: Role play, client interview</td>
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<tr>
<td>Day 2: Afternoon</td>
<td>Motivational Interviewing</td>
<td>Miller &amp; Rollnick, Chs. 6-12</td>
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<td>6. Phase 1: Building Motivation for Change</td>
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<td>7. Responding to Change Talk</td>
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<td>8. Responding to Resistance</td>
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<td>9. Enhancing Confidence</td>
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<td>10. Phase 2: Strengthening Commitment to Change</td>
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<td>11. A Practical Case Example</td>
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<td>12. Ethical Considerations</td>
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<td>In Class: Role play, client interview</td>
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<td>Feb. 16</td>
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<td>Psychosocial History &amp; Assessment Due</td>
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<tr>
<td>Day 3: Morning</td>
<td>Assessment, Treatment Planning</td>
<td>Connors, G.J., Dcovnan, D.M., &amp; DiClemente, Chs. 3 &amp; 4 (Sakai Library):</td>
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<td>3. Assessment</td>
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<td>4. Treatment Planning</td>
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9
| Day 3: Afternoon | Treatment-Related Issues and Relapse Prevention | Miller (Sakai Library):  
Ch. 6: Treatment-related issues (sexual issues, sexual orientation, HIV/AIDS, domestic violence, eating disorders)  
Lewis, Dana & Blevins (Sakai Library):  
Ch. 5: Maintaining change in substance use behaviors  
Ch. 6: Working with Families  
In Class: Role play, Client Interview |
| Day 4: Morning | Cognitive Formulation & Alcohol (substance abuse) Treatment | Review of Beck material (Sakai library)  
Project Match CBT Guide (Sakai library)  
In Class: Case deconstruction |
| Day 4: Afternoon | Pathological Gambling Treatment | Ladouceur & LaChance:  
Chs.1-7: (Assessment, Motivational Enhancement, Behavioral Interventions, Cognitive Interventions)  
Assessment:  
NODS, SOGS, DSM-IV-MR-J  
In class: Role play, client interview |

| March 9 | Motivational Interview Dialogue Due |
| March 16 | Self-Help Write-Up 2 Due |
| March 30 | Cognitive Formulation Due |
| April 6 | Treatment Plan Due |
| April 13 | Self-Help Group Write-Up 3 Due |
| Day 5: Morning | Pathological Gambling Treatment | Ladouceur & LaChance:  
Chs. 8-11: (Relapse Prevention) |
| Day 5: Morning | Sexual Addiction Treatment | Carnes (Sakai Library):  
Ch. 4: Growth of the Addiction System  
Ch. 5: Addict’s Family and Beliefs  
Ch. 7: Twelve Steps and the Beginning of |
| Day 5: Afternoon | Compulsive/Binge Eating Treatment | Agras & Apple:  
Chs. 1-3: Introduction and Special Issues  
Chs. 4-9: Behavior Change  
Chs. 10-14: Identifying Binge Triggers  
Ch. 15: Maintaining Change | Recovery  
Ch. 8: Assessment  
Ch. 9: Intervention and Treatment  
Assessment: SAST  
In class: Role play, client interview |
Assignment Format:

Self-Help Group write-ups: Each class member is required to attend three (3), face-to-face self-help groups during the course and complete a two-page summary sheet (form is on Sakai under “Resources”). Make sure your write up identifies ethical dilemmas, issues related to diversity and social justice. You should select three different meetings for three different groups (i.e. AA, Al-Anon and Gamblers Anonymous). Go to the following web sites to find meetings in your area. Make sure the meeting says “Open,” which means you can attend if you are not a member. When in doubt, contact the group leader if there is one or call the local helpline number.


Al-Anon (families of alcoholics): http://www.al-anon.alateen.org/meetings/meeting.html

ACOA (adult children of alcoholics): http://allone.com/12/aca/

Gamblers Anonymous: http://www.gamblersanonymous.org/mtgdirTOP.html

Gam-Anon: http://www.gam-anon.org/meeting.asp

Sexaholics Anonymous: http://www.sa.org/top/United%20States%20of%20America/

Eating Disorders Anonymous: http://www.eatingdisordersanonymous.org/meetings.html

Overeaters Anonymous: https://www.oa.org/meetings/find-a-meeting/

Narcotics Anonymous: http://portaltwools.na.org/portaltwools/MeetingLoc/

Nar-Anon: http://nar-anon.org/naranongroups.htm

Client Record:

Each assignment in this packet is designed to build on prior assignments to teach students how to perform comprehensive assessments, conduct motivational interviews, and plan short-term cognitive behavioral treatments for individual clients. At the end of the semester, students will have a completed a comprehensive client record that will consist of these successive assignments and will demonstrate mastery of a number of skills that are highly valued in the job market as meeting best practice standards for social workers.

Psychosocial Assessment/Psych. History: You will pick one client who will serve as the focus for all your assignments. The first assignment requires you to complete a detailed psychosocial assessment/psychiatric history on a client presented in the A&E
program “Intervention.” The show usually airs Monday at 9 p.m. and at different times (you can find the times and information and full episodes here: http://www.aetv.com/intervention/). All materials for writing the psychiatric history can be found in the “Document Library” under “Psych/History Intervention.” In that folder you will find: 1) the detailed PDF for information that goes in each section of the psychiatric history (“psychiatric history.pdf”); 2) the Word document you should use for your paper (“Intervention paper template”); and 3) a sample student paper to use as a reference (“Intervention sample paper”). Download the paper template and write your paper directly into this document (of course, removing directions). Do not remove or substitute section headings. If your client is a child, for example, simply put “Not applicable” in sections that pertain to adult development but retain the section headings. I have also included an audio lecture on writing this paper for your review. NOTE: If you completed this assignment successfully last semester and would like to use the same client this semester, please improve your paper as suggested in the comments and resubmit as this first assignment.

As you will see from the paper example, papers are 6-8 pages, single-spaced, 1” margins, 12-point type. The best way to prepare to write the paper is to read through all the sections of the material you will need for the psychiatric history then download the template to allow you to take notes. As you watch the episode, note particulars about the client’s family history, drug-taking behavior, developmental history etc that you note in the episode. You will then have to fill in details with your imagination. When you write the paper, you will be writing as if this client presents to you at a treatment center. This assessment would be what you will complete for the agency when you first assess the client.

**Motivational Interview Dialogue:** This is a two-page, single-spaced dialogue between you and your client. The Miller & Rollnick book has many dialogue examples that can serve as a model for this assignment. The goal is to write your dialogue to include as many examples as possible of the motivational interviewing techniques outlined in your readings.

**Cognitive Formulation:** This is your cognitive assessment of the client. In this assessment you describe at least three (3) core beliefs held by the client, gives examples of those beliefs and how they are triggered by specific situational stressors, accompanying feelings and automatic thoughts, and behavior patterns that result. These should be fully described in paragraph form with a separate heading for each core belief.

**Treatment Plan:** This is a summary of your 8-session treatment plan for the client. Based on your cognitive formulation, you detail, session-by-session, what issues you will address and how in each therapy session. You also detail what in-session assignments you will complete with the client and what homework you will assign for completion and why. You do not need to write 8 separate sessions; you can combine sessions if you feel work on a particular issue will take you more than one session to complete. Begin with at least three (3) Long-term Goals (see p. 92-93 in Connors,
Donovan, DiClemente) for general format. [Note: what you will write is more detailed than the example in the chapter but that is the overall format.] For each long term goal, list short-term goals you will address in therapy (3-5). For each goal, provide a paragraph each (three total) that address: (a) what situational triggers, automatic thoughts and core beliefs you will address; (b) what in-session homework you will use to address these and why; and (c) what homework you will assign and why. For both in-session and homework, make sure you detail the purpose of the assignment. Make sure you tailor your treatment plan to account for issues related to diversity and social justice, prior abuse/neglect, family system stressors, and ethical dilemmas.