

**RUTGERS, THE STATE UNIVERSITY OF NEW JERSEY**  
**SCHOOL OF SOCIAL WORK**  
**COURSE OUTLINE**

**19:910:597**

**Clinical Social Work: Addictive Behaviors II**

**Semester:**

**Instructor:**

**Office hours:**

**Telephone:**

**Email:**

**I. Catalog Course Description**

Building upon the content learned in previous ACT courses, this practice-based course focuses on addiction counseling skills for work with couples, families, and groups, particularly for clients presenting with co-occurring disorders. Students will learn strengths-based, evidence-based interventions including crisis intervention and Motivational Interviewing in a group setting. Students will understand how to provide education about the influence of addiction on the family system as well as identify resources available for affected significant others. Students will learn how to educate families on the psychological, biochemical and sociocultural processes that may influence the addiction recovery process. Students will learn about cultural and sociological traditions of various families and groups and how age, race, gender, social class, culture, ethnicity, spirituality, religion, sexual orientation, national origin, and physical and mental ability can impact recovery from addictive disorders. Students also will examine their own attitudes and beliefs about working with diverse populations. This course is open to all ACT students who have completed the course prerequisites, and it is required for the ACT Certificate.

**II. Course Overview**

This course focuses on the application of counseling skills developed during Clinical Social Work: Addictive Behaviors I, emphasizing the utilization of Motivational Interviewing and Cognitive Behavioral Therapy skills with couples, families, and groups, as well as in crisis situations. An emphasis is made on consideration for cultural differences that may impact a person's treatment and best practices with special populations.

**III. Place of Course in Program**

This course is open to ACT certificate students who have successfully completed Clinical Assessment and Diagnosis, Understanding Addictive Behaviors, and Clinical Social Work: Addictive Behaviors I. It is a required course for the ACT Certificate. This course will be offered in a hybrid format; class content will be delivered in face-to-face/synchronous class sessions and online.

**IV. Program-Level Learning Goals and the Council of Social Work Education's**

## **Social Work Competencies**

The MSW Program at Rutgers is accredited by the Council on Social Work Education (CSWE). CSWE's accreditation standards can be reviewed at [www.cswe.org](http://www.cswe.org).

In keeping with CSWE standards, the Rutgers School of Social Work has integrated the CSWE competencies within its curriculum. *These competences serve as program-level Learning Goals for the MSW Program and include the following. Upon completion of their MSW education students will be able to: demonstrate ethical and professional behavior; engage in diversity and difference in practice; advance human rights and social, economic and environmental justice; engage in practice informed research and research informed practice; engage with individuals, families, groups organizations and communities; intervene with individual, families, groups organizations and communities; and evaluate practice with individuals, families, groups, organizations and communities.*

This course will assist students in developing the following competencies:

**Competency 2: Engage Diversity and Difference in Practice** Social workers understand how diversity and difference characterize and shape the human experience and are critical to the formation of identity. The dimensions of diversity are understood as the intersectionality of multiple factors including but not limited to age, class, color, culture, disability and ability, ethnicity, gender, gender identity and expression, immigration status, marital status, political ideology, race, religion/spirituality, sex, sexual orientation, and tribal sovereign status. Social workers understand 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. Social workers also understand the forms and mechanisms of oppression and discrimination and recognize the extent to which a culture's structures and values, including social, economic, political, and cultural exclusions, may oppress, marginalize, alienate, or create privilege and power. Social workers: (1) apply and communicate understanding of the importance of diversity and difference in shaping life experiences in practice at the micro, mezzo, and macro levels; (2) present themselves as learners and engage clients and constituencies as experts of their own experiences; and (3) apply self-awareness and self-regulation to manage the influence of personal biases and values in working with diverse clients and constituencies.

**Competency 8: Intervene with Individuals, Families, Groups, Organizations, and Communities** Social workers understand that intervention is an ongoing component of the dynamic and interactive process of social work practice with, and on behalf of, diverse individuals, families, groups, organizations, and communities. Social workers are knowledgeable about evidence-informed interventions to achieve the goals of clients and constituencies, including individuals, families, groups, organizations, and communities. Social workers understand theories of human behavior and the social environment, and critically evaluate and apply this knowledge to effectively intervene with clients and constituencies. Social workers understand methods of identifying, analyzing and implementing evidence-informed interventions to achieve client and constituency goals. Social workers value the importance of interprofessional teamwork and communication in interventions, recognizing that beneficial outcomes may require interdisciplinary,

interprofessional, and inter-organizational collaboration. Social workers: (1) critically choose and implement interventions to achieve practice goals and enhance capacities of clients and constituencies; (2) apply knowledge of human behavior and the social environment, person-in-environment, and other multidisciplinary theoretical frameworks in interventions with clients and constituencies; (3) use inter-professional collaboration as appropriate to achieve beneficial practice outcomes; (4) negotiate, mediate, and advocate with and on behalf of diverse clients and constituencies; and (5) facilitate effective transitions and endings that advance mutually agreed-on goals.

## **V. Course Learning Goals**

Course-level learning goals primarily relate to the aforementioned competencies/program-level learning goals as the course addresses the development of cultural competence in informing practice, particularly in intervening with couples, families and groups in the context of treating those with substance use and/or co-occurring disorders. This course emphasizes the use of evidence-based interventions while maintaining a continuous focus on the ways in which the diverse makeup of client populations may influence treatment delivery.

Upon completion of this course, students will be able to:

1. Demonstrate counseling skills necessary for successful crisis intervention.
2. Identify the ways in which historical and sociological context help to form the basis of the nomenclature used to educate ourselves and others about addictive disorders.
3. Describe the ways in which risk and protective factors, located both within the individual and in his/her social context, including economic, cultural and social context, inform the development and maintenance of and recovery from addictive behaviors.
4. Make informed decisions regarding treatment for special populations, including adolescents, women, older adults, homeless persons, people with disabilities, immigrants and refugees, LGBTQ persons, and a variety of ethnicities and cultures, and demonstrate how these influence successful addictions counseling.
5. Analyze the utility of a range of group treatment modalities and apply thoughtful consideration to decisions in regards to group modality selection and application.
6. Present group counseling skills, demonstrating an understanding of the group goals, stages, and techniques necessary for successful group facilitation.
7. Analyze the impact of substance use on the family system, considering individual roles, communication styles and patterns, and the influence of both substance use and sobriety on the system.

8. Present family counseling approaches, demonstrating an understanding of how substance use disorders affect the family members and processes, and utilizing the skills necessary to intervene successfully in family systems.

Students enrolled in this course will fulfill seven content area (domain) requirements necessary for licensure as an LCADC. These are: C203 Crisis Intervention (6 hours), C205 Group Counseling (6 hours), C206 Family Counseling (12 hours), C404 Sociocultural Client Education (6 hours), C405 Addiction Recovery & Psychological Family Education (6 hours), C406 Biomedical/Sociological Family Education (6 hours), and C503 Cultural Competency (6 hours). For a complete outline of these content areas, see the end of the syllabus.

## **VI. School of Social Work Mission Statement and School Wide Learning Goals**

The mission of the School of Social Work is to develop and disseminate knowledge through social work research, education, and training that promotes social and economic justice and strengths individual, family, and community well-being, in this diverse and increasingly global environment of New Jersey and beyond.

School Wide Learning Goals: Upon graduation all students will be able to:

1. Demonstrate Ethical and Professional Behavior;
2. Engage Diversity and Difference in Practice; and
3. Engage, Assess, and Intervene with Individuals, Families, Groups, Organizations, and Communities

## **VII. Required Texts and Readings**

*Required readings will be available via the Canvas course shell.*

## **VIII. Course Attendance and Participation Policies**

1. Students must read all assigned material **before class** and be fully prepared for discussion of the material as well as its application to their own experiences. The course will adopt a seminar format, which depends on full participation from all members.
2. **ACT** Certificate Program requirements include **mandatory** attendance at **all** in-person course meetings. Students missing more than 10% of in-person instruction time will be required to withdraw from and retake the course. Licensing requirements are such that students missing more than 10% of any instructional time will be considered at risk for course failure and/or difficulty in successfully completing the **ACT** program.

### **Zoom (Conferencing Platform) Policy**

If your class section requires class meetings that take place on a web-conferencing platform like Zoom, then attendance will be treated as if you were in an actual face-to-face classroom. Students are expected to join the class on time, with their cameras **on throughout the class**.

You are expected to be available and attentive with your microphone muted unless you are speaking. Most importantly, you should make arrangements to attend class in a quiet space, free from distractions. Please do not join from work, your car, your home or other space if there are co-workers, pets, household members or others in the background. Please be respectful of the instructor and your peers online just as you would be in a physical classroom. For non-ACT students, failure to adhere to this policy will result in a deduction of class participation points. For ACT students where attendance is mandatory, failure to adhere to this policy will count as a missed class.

3. Students will be expected to share examples from their professional and/or fieldwork experience as well as from their current experience within the class groups. This requires respectful reflection and integration of the NASW Code of Ethics with particular regard to cultural competence and respect for the dignity and worth of all. For social workers, confidentiality is a major ethical responsibility. Each student must maintain confidentiality concerning any personal or case material discussed in class. No information revealed in class is to be discussed with anyone outside the class environment.
4. Professional social workers must have excellent writing skills. Proper grammar, syntax, spelling, and appropriate referencing are expected for all assignments.

Your journals will be:

- Thoughtful, thought-provoking, and **concise** (longer is not necessarily better!)
- Responsive to the directions of the assignment.
- Grammatically correct, error-free, in APA style; see link for APA style information <http://apastyle.apa.org/> or <http://owl.english.purdue.edu/owl/resource/560/01/>
- Signed under the following written pledge: *On my honor, I have neither received nor given any unauthorized assistance on this examination (assignment)*. You may ask another person to review your paper, making comments on editorial issues such as spelling and grammar, but no other person may contribute ideas or content.
- On time on the due date. Students are given a week to submit assignments and no late assignments will be accepted for any reason.
- Your own work. Please review these websites for information about what is acceptable and what constitutes plagiarism: <http://www.indiana.edu/~wts/pamphlets/plagiarism.pdf> and <http://owl.english.purdue.edu/owl/resource/589/01/> and <http://www.library.ualberta.ca/guides/plagiarism/> Please talk with your instructor if you have any additional questions.

5. When submitting materials, be sure to confirm that the paper was properly loaded onto the course website. If you are having problems, email the Canvas Helpdesk for assistance. Do not wait until a few minutes before the due date/time to submit your work because if it is not in by the time the window closes on the due date, it will not be accepted. Please note: No assignments are accepted through email or any other means except the assignment submission dropbox.

## **IX. Diversity Statement**

The RU SSW supports an inclusive learning environment where diversity, individual differences and identities (including race, gender, class, sexuality, religion, ability, etc.) are respected and recognized as a source of strength. Students and faculty are expected to respect differences and contribute to a learning environment that allows for a diversity of thought and worldviews. Please feel free to speak with me if you experience any concerns in this area.

## **X. Assignments and Grading**

To receive full credit, assignments are due in the drop-box on the due date. In rare instances, due to unanticipated and extenuating student circumstances, students may need additional time to complete an assignment. Therefore, students may submit assignments late. However, assignments will receive a 10% deduction for each day late. Discussion board posts and other “real-time” assignments are not eligible for any extensions.

*SSW MSW Grading Scale:* Below is the grading scale for the MSW program

A	92-100
B+	87-91
B	82-86
C+	77-81
C	70-76
F	0-69

\*Scores to be rounded up at .5

### *Assignment Value*

- Online participation 20%
- Special populations presentation 25%
- Group facilitation video 25%
- Addictive family systems reflection paper 15%
- Mutual support meeting attendance 15%

See the assignments at end of syllabus for a more detailed discussion of grading.

## **XI. Academic Resources**

### **Library Research Assistance**

**Meredith Parker** is the social work librarian on the New Brunswick Campus [Meredith.parker@rutgers.edu](mailto:Meredith.parker@rutgers.edu) p. 848-932-6104 ; **Natalie Borisovets** is at Newark, Dana Library [natalieb@rutgers.edu](mailto:natalieb@rutgers.edu) 973-353-5909; **Katie Anderson** is at Camden, Robeson Library: [Katie.anderson@rutgers.edu](mailto:Katie.anderson@rutgers.edu) 856-225-2830. They are all available to meet with students.

### **Writing Assistance**

Success in graduate school and within the larger profession of social work depends on strong writing skills. Several resources are available to help students strengthen their professional and academic writing skills. Writing assistance is available to all MSW students as described below.

#### **New Brunswick Campus**

All MSW SSW students (New Brunswick, Camden, Newark, Intensive Weekend, online and blended) are eligible to access writing assistance at the New Brunswick Learning Center. Online tutoring may also be available.

<https://rlc.rutgers.edu/student-services/writing-tutoring>

#### **Newark Campus**

The Newark writing center is available for MSW students on the Newark campus by appointment.

<http://www.ncas.rutgers.edu/writingcenter>

### **Additional Online Resources**

#### ***APA Style***

All students are expected to adhere to the citation style of the *Publication Manual of the American Psychological Association*, 7<sup>th</sup> edition (2020). It can be purchased at [APA Manual 9th Edition](#). The Purdue OWL website also provide assistance with APA style <https://owl.english.purdue.edu/owl/resource/560/01/>

#### ***Email Etiquette for Students***

<https://owl.english.purdue.edu/owl/resource/694/01/>

## **XII. Course Evaluation**

Rutgers University issues a survey that evaluates both the course and instructor. This survey is completed by students toward the end of the semester, and all answers are confidential and anonymous. The instructor may also choose to conduct a mid-point evaluation.

### **XIII. Academic Integrity**

As per Rutgers University Academic Integrity Policy, “Students are responsible for understanding the principles of academic integrity and abiding by them in all aspects of their work at the University. Students are also encouraged to help educate fellow students about academic integrity and to bring all alleged violations of academic integrity they encounter to the attention of the appropriate authorities.” All SSW students are expected to review and familiarize themselves with the [RU Academic Integrity Policy](#) in its’ entirety.

As per Rutgers University Academic Integrity Policy, “The principles of academic integrity require that a student: make sure that all work submitted in a course, academic research, or other activity is the student’s own and created without the aid of impermissible technologies, materials, or collaborations; properly acknowledge and cite all use of the ideas, results, images, or words of others; properly acknowledge all contributors to a given piece of work; obtain all data or results by ethical means and report them accurately without suppressing any results inconsistent with the student’s interpretation or conclusions; treat all other students ethically, respecting their integrity and right to pursue their educational goals without interference. This principle requires that a student neither facilitate academic <sup>[[L]]</sup><sub>[[SEP]]</sub> dishonesty by others nor obstruct their academic progress; uphold the ethical standards and professional code of conduct in the field for which the student is preparing.” <sup>[[L]]</sup><sub>[[SEP]]</sub>

Students should review all types of Academic Integrity Violations per the RU Academic Integrity Policy. Below are some of the more common violations, as articulated in Rutgers University Academic Integrity Policy:

**“Plagiarism:** Plagiarism is the use of another person’s words, ideas, images, or results, no matter the form or media, without giving that person appropriate credit. To avoid plagiarism, a student must identify every direct quotation using quotation marks or appropriate indentation and cite both direct quotation and paraphrasing 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, regardless of the nature of the assignment; Incorporating into one’s work graphs, drawings, photographs, diagrams, tables, spreadsheets, computer programs, or other non-textual material from other sources, regardless of format, without proper attribution.” <sup>[[L]]</sup><sub>[[SEP]]</sub>

**“Cheating:** Cheating is the use or possession of inappropriate or prohibited materials, information, sources, or aids in any academic exercise. Cheating also includes submitting papers, research results or reports, analyses, and other textual or visual material and media as one’s own work when others prepared them. Some common examples are: Prohibited



collaboration: receiving research, programming, data collection, or analytical assistance from others or working with another student on an assignment where such help is not permitted; Copying another student's work or answers on a quiz or examination; Using or having access to books, notes, calculators, cell phones, technology, or other prohibited devices or materials during a quiz or examination; Submitting the same work or major portions thereof to satisfy the requirements of more than one course without permission from the instructors involved; Preprogramming a calculator or other device to contain answers, formulas, or other unauthorized information for use during a quiz or examination.; Acquiring a copy of an examination from an unauthorized source before the examination; Having a substitute take an examination in one's place; Submitting a purchased or downloaded term paper or other materials to satisfy a course requirement; Submitting as one's own work a term paper or other assignment prepared, in whole or in part, by someone else." <sup>[1]</sup><sub>SEP</sub>

Any faculty member or academic administrator who becomes aware of a possible academic integrity violation must initiate a formal complaint with the Office of Student Conduct and the SSW's Academic Integrity Facilitator (Laura Curran at [lacurran@ssw.rutgers.edu](mailto:lacurran@ssw.rutgers.edu)). The AIF deciding the case (the "adjudicator") shall notify the accused student of the allegation in writing or by electronic communication within fifteen working days of the time the faculty member becomes aware of 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, see [RU Academic Integrity Policy](#) and [Procedures for Adjudicating Academic Integrity Violations](#)

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/assignment.*

#### **XIV. Disability Accommodation**

Rutgers University welcomes students with disabilities into all of the University's educational programs. In order to receive consideration for reasonable accommodations, a student with a disability must contact the appropriate disability services office at the campus where you are officially enrolled, participate in an intake interview, and provide documentation: <https://ods.rutgers.edu/students/documentation-guidelines>.

If the documentation supports your request for reasonable accommodations, your campus' disability services office will provide you with a Letter of Accommodations. Please share this letter with your instructors and discuss the accommodations with them as early in your courses as possible. To begin this process, please complete the Registration form on the ODS web site at: <https://ods.rutgers.edu/students/registration-form>.

#### **XV. Other Resources**

Our school is committed to fostering a safe, productive learning environment. Title IX and our school policy prohibit discrimination on the basis of sex, which regards sexual misconduct — including harassment, domestic and dating violence, sexual assault, and stalking. We understand that sexual violence can undermine students’ academic success and we encourage students who have experienced some form of sexual misconduct to talk to someone about their experience, so they can get the support they need.

Confidential support and academic advocacy are available through the Rutgers Office on Violence Prevention and Victim Assistance, 732.932.1181, <http://vpva.rutgers.edu>. Services are free and confidential and available 24 hrs/day, 7 days a week.

**Active Shooter Resources:** Over the years, there has been an increase in the number of active shootings on campus. It is important that you know what to do in cases there is an active shooter on campus. Please go to this site to retrieve information that will reduce your personal risk in case of an active shooting on campus-<http://rupd.rutgers.edu/shooter.php>.

**XVI. Course Outline**

A variety of methods is used including lectures, discussions, exercise, assignments, readings, and videos.

<b>Module 1: Course Introduction</b>			
<b>Dates</b>	<b>Activity</b>	<b>Points</b>	<b>Due Date</b>
	Readings: <ul style="list-style-type: none"> <li>• Course Syllabus</li> </ul>		Day 3
	Assignment: <ul style="list-style-type: none"> <li>• Discussion Board</li> </ul>	10	Initial post: Day 3 (recommended)  Responses: Day 7

<b>Module 2: Crisis Intervention</b>			
<b>Dates</b>	<b>Activity</b>	<b>Points</b>	<b>Due Date</b>
	Required Readings: <ul style="list-style-type: none"> <li>• Global Criteria and Core Functions:               <ul style="list-style-type: none"> <li>○ 8- Crisis Intervention- GC 30-32</li> </ul> </li> <li>• SAMHSA (2009). <i>Practice guidelines: Core elements for responding to mental health crises</i>. HHS Pub. No. SMA-09-4427. Rockville, MD: Center for Mental Health Services, Substance Abuse and Mental Health Services Administration, <a href="http://www.bazelon.org/wp-content/uploads/2017/01/Practice-Guidelines.pdf">http://www.bazelon.org/wp-content/uploads/2017/01/Practice-Guidelines.pdf</a></li> </ul>		Day 3

	Assignment: <ul style="list-style-type: none"> <li>• View video example of crisis intervention</li> <li>• Discussion Board</li> </ul>	10	Initial post: Day 3 (recommended)  Responses: Day 7
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<b>Module 3: Suicide Risk Assessment and Management</b>			
<b>Dates</b>	<b>Activity</b>	<b>Points</b>	<b>Due Date</b>
	Required Readings: <ul style="list-style-type: none"> <li>• TIP 50: Addressing Suicidal Thoughts and Behaviors in Substance Abuse Treatment               <ul style="list-style-type: none"> <li>○ Chapter 1</li> </ul> </li> </ul> Recommended Readings: <ul style="list-style-type: none"> <li>• Fowler, J. C. (2012). Suicide risk assessment in clinical practice: Pragmatic guidelines for imperfect assessments. <i>Psychotherapy, 49</i>, 81-90.</li> <li>• Integrated Treatment for Co-Occurring Disorders: Treating People, Not Behaviors. Chapter 6: Suicide Risk Assessment for Co-Occurring Disorders</li> </ul>		Day 3
	Assignment: <ul style="list-style-type: none"> <li>• Discussion Board</li> </ul>		Initial post: Day 3 (recommended)  Responses: Day 7

<b>Module 4: Cultural Competence: Self-Assessment</b>			
<b>Dates</b>	<b>Activity</b>	<b>Points</b>	<b>Due Date</b>
	Exercise: Complete at least 4 self-assessment tools at: <ul style="list-style-type: none"> <li>• <a href="https://implicit.harvard.edu/implicit/">https://implicit.harvard.edu/implicit/</a></li> </ul>		Day 7
	Assignment: <ul style="list-style-type: none"> <li>• Submit a two-page journal entry about your experience exploring your personal biases, including what biases you already were aware of, what you have learned from this exercise, and how you plan to further develop into a culturally competent clinician.</li> </ul>	10	Day 7

<b>Module 5: Culturally Competent Counseling</b>			
<b>Dates</b>	<b>Activity</b>	<b>Points</b>	<b>Due Date</b>
	Required readings: <ul style="list-style-type: none"> <li>• TIP 59: Cultural Competence               <ul style="list-style-type: none"> <li>○ Chapter 3: Culturally Responsive Evaluation and Treatment Planning</li> <li>○ Chapter 5: Behavioral Health for Major Racial and Ethnic Groups</li> </ul> </li> </ul>		Day 3

	<p>○ Chapter 6: Drug Cultures and the Culture of Recovery</p> <p>Recommended readings:</p> <ul style="list-style-type: none"> <li>• Sue, D. W., &amp; Sue, D. (2016). <i>Counseling the culturally diverse theory and practice</i>. Hoboken, NJ: John Wiley &amp; Sons. – Chapter 13: Culturally Competent Assessment</li> <li>• Donovan, D. M., &amp; Marlatt, G. A. (2005). <i>Assessment of addictive behaviors</i> (2nd ed.). New York: Guilford Press. Chapter 2: Assessment of Addictive Disorders in Ethnic-Minority Cultures.</li> </ul>		
	<p>Assignment: <b>Mutual Support Meeting Documentation 16-20 Due</b></p>	5	Day 7
	<p><b>Special Population Presentation:</b> Based on selected special population, students will develop a presentation of 8-10 minutes to give classmates an overview of salient assessment and treatment information for the particular population. See end of syllabus for full assignment description.</p>	100	(Ongoing) Module 6, Day 7

<b>Module 6: Counseling Special Populations</b>			
<b>Dates</b>	<b>Activity</b>	<b>Points</b>	<b>Due Date</b>
	<p>Recommended readings, to complement special population presentation viewing:</p> <ul style="list-style-type: none"> <li>• TIP 26: Substance Abuse and Older Adults</li> <li>• SAMHSA Publication: <a href="#">A Provider's Introduction to Substance Abuse Treatment for Lesbian, Gay, Bisexual, and Transgender Individuals</a>. Chapters 1-2.</li> <li>• TIP 31: Screening &amp; Assessing Adolescents with Substance Use Disorders</li> <li>• TIP 51: Addressing the Specific Needs of Women</li> <li>• TIP 54: Managing Chronic Pain in Adults with or in Recovery from Substance Use Disorders</li> <li>• TIP 37: Substance Abuse Treatment for Persons with HIV/AIDS</li> <li>• TIP 48: Managing Depressive Symptoms in Substance Abuse Clients during Early Recovery</li> <li>• TIP 29: Substance Use Disorder Treatment for People with Physical &amp; Cognitive Disabilities</li> <li>• TIP 61: Behavioral Health Services for American Indians and Alaska Natives</li> </ul>		
	<b>Special Population Presentation Due</b>	25	Day 7

<b>Module 7: Diversity in Mutual-Support Settings</b>			
<b>Dates</b>	<b>Activity</b>	<b>Points</b>	<b>Due Date</b>

	<p>Recommended Readings:</p> <ul style="list-style-type: none"> <li>• Borden, A. (2007). The history of gay people in Alcoholics Anonymous: From the beginning. New York: Haworth Press.</li> <li>• Hoepfner, B. B., Hoepfner, S. S., &amp; Kelly, J. F. (2014). Do young people benefit from AA as much, and in the same ways, as adult aged 30+? A moderated multiple mediation analysis. <i>Drug and alcohol dependence, 143</i>, 181-188.</li> <li>• Kelly, J. F., &amp; Hoepfner, B. B. (2013). Does Alcoholics Anonymous work differently for men and women? A moderated multiple-mediation analysis in a large clinical sample. <i>Drug and alcohol dependence, 130</i>(1-3), 186-193.</li> </ul>		
	<p>Assignment:</p> <ul style="list-style-type: none"> <li>• Respond to assigned classmates' Special Population presentations.</li> </ul>	10	<p>Initial post: Day 3 (recommended)</p> <p>Responses: Day 7</p>
	<p>Assignment:</p> <ul style="list-style-type: none"> <li>• Discussion Board</li> </ul>	10	<p>Initial post: Day 3 (recommended)</p> <p>Responses: Day 7</p>

<b>Module 8: Introduction to Group Counseling</b>			
<b>Dates</b>	<b>Activity</b>	<b>Points</b>	<b>Due Date</b>
	<p>Required readings:</p> <ul style="list-style-type: none"> <li>• TIP 41 – Substance Abuse Treatment: Group Therapy, Chapters 1-2</li> </ul>		Day 3
	<p>Assignment:</p> <ul style="list-style-type: none"> <li>• Ask field instructor/LCADC supervisor why particular group modalities were chosen for the work done at your agency.</li> <li>• Discussion Board</li> </ul>	10	<p>Initial post: Day 3 (recommended)</p> <p>Responses: Day 7</p>
	<p><b>Group Facilitation:</b> Students will identify a topic for either a skill-based or psychoeducational group that would be appropriate for a SUDs treatment agency. They will develop an outline and record an introduction to the group topic as if to clients. See end of syllabus for full assignment description.</p>	20	(Ongoing) Module 10, Day 7

<b>Module 9: Group Development &amp; Stages</b>
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Dates	Activity	Points	Due Date
	Required readings: <ul style="list-style-type: none"> <li>TIP 41 – Substance Abuse Treatment: Group Therapy, Chapters 3-5</li> </ul>		Day 3
	Assignment: <ul style="list-style-type: none"> <li>Discussion Board</li> </ul>	10	Initial post: Day 3 (recommended)  Responses: Day 7
	<b>Group Facilitation:</b> Students will identify a topic for either a skill-based or psychoeducational group that would be appropriate for a SUDs treatment agency. They will develop an outline and record an introduction to the group topic as if to clients. See end of syllabus for full assignment description.	20	(Ongoing) Module 10, Day 7

Module 10: Group Leadership			
Dates	Activity	Points	Due Date
	Required readings: <ul style="list-style-type: none"> <li>TIP 41 – Substance Abuse Treatment: Group Therapy, Chapter 6</li> </ul>		Day 3
	Assignment: <b>Group Facilitation outline submission and video posting</b>	20	Day 7
	Assignment: <b>Mutual Support Meeting Documentation 21-25 Due</b>	5	Day 7

Module 11: Motivational Interviewing in Groups			
Dates	Activity	Points	Due Date
	Required Readings: Wagner, C., & Ingersoll, K. S. (2013). Motivational interviewing in groups. New York: The Guilford Press. <ul style="list-style-type: none"> <li>Chapter 4: Blending Motivational Interviewing and Group Practice</li> <li>Chapter 6: Designing Motivational Interviewing Groups</li> <li>Chapter 7: Implementing Motivational Interviewing Groups</li> </ul>		Day 3
	Assignment: Respond to the Group Facilitation outlines and introductions posted by assigned classmates, offering thoughtful feedback (more than e.g., “good job!”). Specifically consider how the use of MI techniques may influence the utility of the proposed group, showing integration of the week’s readings into your responses.	10	Initial post: Assignment Posting  Responses: Day 7

Module 12: Family Counseling: Introduction			
Dates	Activity	Points	Due Date

	<p>Required Readings:</p> <ul style="list-style-type: none"> <li>• TIP 39: Substance Abuse Treatment and Family Therapy <ul style="list-style-type: none"> <li>○ Chapter 1: Substance Abuse Treatment and Family Therapy</li> <li>○ Chapter 3: Approaches to Therapy</li> </ul> </li> <li>• Steinglass, P. (2009). Systemic-motivational therapy for substance abuse disorders: An integrative model. <i>Journal of Family Therapy</i>, 31, 155-174.</li> <li>• <a href="#">Al-Anon's 12 Steps &amp; 12 Traditions</a></li> </ul>		Day 3
	<p>Recommended Readings:</p> <ul style="list-style-type: none"> <li>• Bepko, C. (1985). <i>Responsibility trap: A blueprint for treating the alcoholic family</i>. New York: Free Press. <ul style="list-style-type: none"> <li>○ Chapter 6: Intervening in Alcoholic Systems Before Sobriety</li> <li>○ Chapter 7: Intervening in Alcoholic Systems After Sobriety</li> </ul> </li> <li>• Stanton, M. D., &amp; Todd, T. C. (1983). <i>The family therapy of drug abuse and addiction</i>. New York: The Guilford Press.</li> <li>• Ashenberg Straussner, A. L. (ed), (2014). <i>Clinical work with substance abusing clients. (3<sup>rd</sup> edition)</i>. New York: The Guilford Press. <ul style="list-style-type: none"> <li>○ Chapter 13- Family treatment of individuals with substance use disorders</li> </ul> </li> <li>• Krestan, J. (Ed.). (2000). <i>Bridges to recovery: Addiction, family therapy, and multicultural treatment</i>. New York: Free Press. (**Chapters are available regarding treating families of different ethnic backgrounds**)</li> </ul>		
	<p>Assignment:</p> <ul style="list-style-type: none"> <li>• Discussion Board</li> </ul>	10	<p>Initial post: Day 3 (recommended)</p> <p>Responses: Day 7</p>

<b>Module 13: Family Counseling: Couples &amp; Children</b>			
<b>Dates</b>	<b>Activity</b>	<b>Points</b>	<b>Due Date</b>
	<p>Required readings:</p> <ul style="list-style-type: none"> <li>• Ashenberg Straussner, A. L. (ed), (2014). <i>Clinical work with substance abusing clients. (3<sup>rd</sup> edition)</i>. New York: The Guilford Press. <ul style="list-style-type: none"> <li>○ Chapter 14 – Treating the partners of individuals with substance use disorders</li> <li>○ Chapter 15 – Dynamics and treatment issues with children of individuals with substance use disorders</li> </ul> </li> </ul>		Day 3

	<p>Recommended reading:</p> <ul style="list-style-type: none"> <li>• O'Farrell, T. J., &amp; Fals-Stewart, W. (2012). Behavioral couples therapy for alcoholism and drug abuse. Guilford Press.</li> </ul>		
	<p>Assignment:</p> <ul style="list-style-type: none"> <li>• Discussion Board 1</li> </ul>	10	<p>Initial post: Day 3 (recommended)</p> <p>Responses: Day 7</p>
	<p>Assignment:</p> <ul style="list-style-type: none"> <li>• Discussion Board 2</li> </ul>	10	<p>Initial post: Day 3 (recommended)</p> <p>Responses: Day 7</p>

<b>Module 14: Addictive Family Systems</b>			
<b>Dates</b>	<b>Activity</b>	<b>Points</b>	<b>Due Date</b>
	<p>Required Reading:</p> <ul style="list-style-type: none"> <li>• TIP 39: Substance Abuse Treatment and Family Therapy: <ul style="list-style-type: none"> <li>○ Chapter 2 – Impact of Substance Abuse on Families</li> <li>○ Chapter 5- Specific Populations</li> </ul> </li> </ul>		Day 3
	<p>Recommended Readings:</p> <ul style="list-style-type: none"> <li>• Lander, L., Howsare, J., &amp; Byrne, M. (2013). The impact of substance use disorders on families and children: from theory to practice. <i>Social work in public health</i>, 28(3-4), 194-205.</li> <li>• Brown, S., &amp; Lewis, V. (1999). <i>The alcoholic family in recovery</i>. New York: The Guilford Press.</li> </ul>		
	<p>Assignment:</p> <ul style="list-style-type: none"> <li>• Discussion Board 1</li> </ul>	10	<p>Initial post: Day 3 (recommended)</p> <p>Responses: Day 7</p>
	<p>Assignment:</p> <ul style="list-style-type: none"> <li>• Discussion Board 2</li> </ul>	10	<p>Initial post: Day 3 (recommended)</p> <p>Responses: Day 7</p>
	<p>Assignment:</p> <p>Mutual Support Meeting documentation 26-30 due</p>	5	Day 7
	<p>Assignment: <b>Addictive Family Systems Reflection Paper:</b> Watch the movie <u>Under the Influence</u>: <a href="https://www.youtube.com/watch?v=tgi47LOZO4M">https://www.youtube.com/watch?v=tgi47LOZO4M</a> and</p>	10	Day 7



	write a 3-5 page reflection paper about the family in the movie based on your knowledge of addictive family systems. See end of syllabus for full assignment description.		
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<b>Module 15: Course Wrap-Up</b>			
<b>Dates</b>	<b>Activity</b>	<b>Points</b>	<b>Due Date</b>
	Assignment: <ul style="list-style-type: none"> <li>• Discussion Board</li> </ul>	10	Day 7

## **XVII. Course Assignments**

### **Participation in Online Activities**

20% of final grade

Students will be expected to respond to discussion questions, their peers' presentations, and a journal prompt posted on the course website. Discussion question responses will be engaged reflections, queries, conversation, and respectful, intellectual dialogue rather than cursory commentary. The journal entry in Module 4 is intended to be a thoughtful self-reflection. See etiquette, instructions, and grading rubric at the end of the syllabus.

### **Special Populations presentation**

25% of final grade

The purpose of this assignment is to give students an opportunity to learn about special populations and the unique opportunities and challenges presented by counseling a diverse client base. Additionally, this assignment will allow students the chance to show their ability to discern the most salient aspects of literature and assume a didactic role in presenting to classmates.

Choose a topic from the list below or develop one of your own (subject to instructor approval) for this assignment. Please email the instructor with your request for a topic as soon as possible. To encourage a variety of content, no duplicate topics will be permitted – so the earlier you express interest in a particular topic, the more likely you will be able to have your first choice.

Prepare an oral presentation video (see instructions below) approximately 8-10 minutes in length, using PowerPoint slides, and then upload it for viewing by your colleagues in class.

Presentations are to cover substances use disorders among a population you choose from among those listed below. The presentation is to include:

- A brief description of the population, paying close attention to the many aspects of culture that will be important to know to provide services that are sensitive to the uniqueness of the individual
- Best practices for screening, assessing, and diagnosing clients for this population
- Factors that may be unique to developmental stages, biology, and the etiology of addictions within this group

- Any social forces, norms, or policy that might be influential
- A brief description of your own attitudes and beliefs about working with this population and your plans to improve your knowledge and skills in this area

All information must be collected from credible research or clinical literature, and the sources for your information must be cited on your PowerPoint slides using APA style. Trustworthy research and clinical literature can be found via various library databases, including but not limited to the Medline, PsychInfo, PyscFIRST, and the Web of Science. Clinically and theoretically oriented books on your topic are also permissible – but not pop psychology or self-help books. Website-based information from sites like Wikipedia, for-profit treatment organizations, and pop psychology or personal recovery websites and blogs should be avoided. Credible websites like NIDA, NIAAA, or SAMHSA are acceptable. Older materials are only acceptable if seminal work; otherwise, use references from the last decade! If you are uncertain how to access current, scholarly resources, contact Karen Hartman, our librarian... she's fabulous!

Plan your presentation as if you were speaking at a professional conference, and be sure to review the grading rubric as you prepare.

Following is a quick summary of the guidelines to make your slide presentation effective and successful:

- Stick to one main idea per slide
- Use phrases rather than complete sentences
- Use only 6 to 7 words per line, totaling no more than 40 characters
- Use no more than 6 to 7 lines of printing per slide, with a blank line in between each
- Use at least an 18-point font size
- Simplify graphics and do not over-reduce artwork
- Use easy-to-read colors, such as white or yellow on a blue background
- Double-check your message! It should be easily grasped in 30 to 40 seconds per slide

### **Video instructions**

The creation of your presentation video must use PowerPoint as your presentation medium while capturing your voice as narrator while moving through your presentation. For the students with experience creating videos, feel free to use a video production method of your choosing. For students with little or no experience, do not be concerned – this is an easy process. Consider using a tool called Jing, free downloadable software that will capture your PC screen and your voice at the same time. Another option is Camtasia, a more sophisticated software tool but developed by the same company who offers Jing. To learn more about Jing, to read the instructions, and to download the software free, direct your browser to the following link: <http://www.techsmith.com/jing/free/>.

Jing limits you to a 5-minute presentation, so you will need to create two 5-minute files to post for your colleagues. Your presentation should include a title slide, your content slides, and a slide containing any references that you decide to use in support of your presentation. Each fact must be cited on the slide using APA style, and be fully cited on a concluding “References” page.

## Submission Instructions:

### **Part One: Submission to Instructor**

Click on the blue "Submit Assignment" button at the top right of the page

1. Select the "File Upload/Media Upload" tab.
2. Click the "choose file" button and browse to your assignment. Make sure you name your file starting with your last name followed by a 3 to 5 word title and whether it is file #1, #2 or #3 (e.g., Smith - Special Population African Americans1). As you will have more than one file to upload, click the "Add Another File" link and repeat.
3. Click the "Submit Assignment" button at the bottom of the submission dialog box.

### **Part Two: Posting to Discussion Board for Classmates' Responses**

1. See instructions indicated here: [Instructions for using the video tool in the Canvas Discussion Boards](#).

2. Create a new thread that should contain a few introductory sentences explaining your topic, like a very brief abstract. Next, post several good questions about your topic to your colleagues in class. Note: good questions provoke discussion - e.g., practice decisions, ethical dilemmas.

Your colleagues will view your presentation, and then reply to your questions and post questions and comments of their own. You are expected to engage in dialogue and provide useful replies. Likewise, you will view your colleagues' presentations and post questions and comments, to which they will reply. See the section on Threaded Discussions later in this syllabus for guidance and grading rubric. Posts can be in the form of questions or comments directed to the presentation author, the instructor, or your classmates. Your responses regarding your own presentation will count toward the project grade, whereas your contributions to the forum discussions of your classmates' presentations will count toward your class participation grade. Do not procrastinate, or you will miss your opportunity to be a part of a meaningful discussion.

The nature of this assignment requires timely posting, so late video files and discussion threads will not earn any points.

### Special Populations List

- Adolescents
- Older adults
- Women
- Native Americans / American Indians / Indigenous peoples
- Hispanic / Latino(a) persons
- African Americans
- Asian cultures
- Caribbean cultures
- LGBTQ persons
- People with physical disabilities
- People with developmental disabilities
- Homeless persons
- Immigrants and refugees

- Veterans
- People who have been sexually assaulted
- College students
- Adult Children of Alcoholics (ACoAs)
- People who have experienced trauma
- People with criminal justice system involvement
- Other special populations (request instructor approval)

### **Group Facilitation**

25% of final grade

In this assignment, students will have the opportunity to exhibit their ability to synthesize reading materials on group counseling into planning for the facilitation of a skill-based or psychoeducational group. To successfully complete this assignment, students will note the following instructions:

**Step 1:** Students will identify a topic for either a skill-based or psychoeducational group that would be appropriate for a SUDs treatment agency. They will create an outline (1-2 pages) – not to be taken out of an existing curriculum – for that group including:

- Rationale for choosing this topic
- Learning objectives for the group session
- A plan for structuring the group session
- Clinical considerations or preparations important to promote success of the group session
- Additionally, students will include a single-page handout or exercise to be completed by clients (does not need to be complex or complicated)

This is to be submitted via the assignment submission on Canvas.

**Step 2:** On Canvas, using the Record/Media Upload, Screen-Cast-O-Matic or Kaltura CaptureSpace tool students will record themselves *as if to clients at the beginning of a group session*. In the video, students are to role play an introduction to the group session by providing an overview of the rationale for the group topic, an outline of the learning objectives and an explanation of the handout. Students are to use language as they would in a clinical setting, seeking to assure the viewer is prepared for engagement in a group session.

Please note: When students create the post for their classmates, they should include a copy of the single-page handout *but not the outline*. (The information in the established outline should be understood by classmates via the voice recording.)

### **Addictive Family Systems Reflection Paper**

15% of final grade

Watch the movie Under the Influence: <https://www.youtube.com/watch?v=tgi47LOZO4M> and write a 3-5 page reflection paper about the family in the movie based on your knowledge of addictive family systems.

Consider the following questions in your reflection:

- What does the family do to maintain homeostasis?
- What roles does each member of the family play?

- In what ways are drinking behaviors reinforced? Discouraged?
- What resources does this family have access to that will support attempts at abstinence? What barriers exist?
- What communication patterns do you observe?

Please note: Revisiting TIP 39 may be useful in assessing the family through a clinical lens.

### **Mutual Support Meeting Reports**

15% of final grade

For licensing, you are required to attend 30 mutual support meetings - 5 AA, 5 NA, 5 Al-Anon, and 15 in any mutual support group related to addiction recovery. For the ACT program, we have slightly different requirements to broaden your education, but you will have fulfilled the LCADC meeting requirement by the completion of this course. Altogether, you must attend and submit reports for

- Five AA meetings
- Five NA meetings
- Five Al-Anon meetings

You also must attend a variety of other meetings, as follows:

- Two Gamblers Anonymous meetings
- Two other behavioral addiction meetings – e.g., Overeaters Anonymous, Sexaholics Anonymous
- Two alternatives to 12 Steps – e.g., SMART Recovery, Women for Sobriety

This leaves nine meetings of your choice, for 30 meetings in total.

Most of you have completed 15 meetings for your Clinical Social Work: Addictive Behaviors I course, and you may have attended additional meetings throughout your ACT education. For this course, you are to attend the remaining 15 meetings, to bring you to the required balance of 30 total. It had been recommended that you wait until this semester to attend the Al-Anon meetings, so you may consider them in the context of the instruction and readings related to family counseling and the impact of SUDs on the family system.

We ask that you attend no individual meeting more than twice. For example, you may attend the Tuesday, 6:00 PM AA meeting at St. Paul’s Church only two times, but you may also attend the 8:00 PM meeting on Friday at the same location two times. These meeting requirements can be met in any combination as long as each requirement is met.

You are encouraged to attend different types of meetings, such as discussion, speaker, Big Book, or step meetings. It is important that you attend the majority of these meetings on your own rather than with someone else from the ACT program. If you are not recovering, you must attend only **OPEN** meetings. When it comes times to identify yourself, we recommend that you simply say, “Hi, my name is \_\_\_\_.” We caution against identifying as a student or observer and ask that you carefully consider the consequences for group members in recovery if you present yourself in this way. **DO NOT** identify as an alcoholic or addict if you are not.

You are to write a brief report using the forms provided on the **Canvas** website, and at the end of this syllabus, for each of your meeting experiences. After completing each form, scan it and submit in the appropriate Canvas assignment. Please label your files as follows: Last name, First name, meeting # – i.e., Smith, Steve, meeting 17. By the end of this class, you should have submitted 30 forms altogether.

Presuming you submitted 15 meeting forms for Clinical Social Work: Addictive Behaviors I, you will submit the additional 15 in this course, beginning with meeting #16. We will check to confirm that each of you has completed all 30 forms before you receive your ACT certificate.

**Please attend meetings throughout the semester.** Do not delay so that you need to attend the bulk of the meetings in the last few days before the due date. We hope to compile all the reports into a Mutual Support Group Resource Guide that will be available online to all graduates of the ACT program.

### LCADC Content Areas/Domains Covered in this Course

#### C203: Crisis Intervention

1. Define crisis intervention within the framework of alcohol/drug counseling as per IC & RC.
2. Identify causes of crises (i.e. The four types of trauma: situational, developmental, intrapsychic, existential.)
3. Identify and give examples of the five psychological reactions to crisis (Shock, anxiety, depression, anger, intellectualization.)
4. Explain four goals of crisis intervention (stabilization, pressure relief, problem-solving, and return to pre-crisis function) and describe six stages comprising the crisis intervention process (establish rapport, gather data, reframe crisis, explore realistic options, contact supportive individuals, arrange for follow-up).
2. Identify the risk factors and cues associated with suicide.
3. Describe and demonstrate the appropriate set of responses to a suicide crisis (form relationship, identify key issues, assess for lethality, evaluate client strengths and resources, develop and implement plan, intervene appropriately to respond to imminent danger).
4. Identify & explain the qualities of an effective crisis counselor (empathy, effective questioning, rapid assessment, realistic viewpoint, effective resource utilization.)
5. Competency 16: Recognize that crisis may indicate an underlying substance use disorder and may be a window of opportunity for change.
6. Competency 23: Understand and apply setting-specific policies and procedures for handling crisis or dangerous situations, including safety measures for clients and staff.
7. Competency 24: Establish rapport, including management of a crisis situation and determination of need for additional professional assistance.
8. Competency 86: Apply crisis prevention and management skills

#### C205: Group Counseling

1. Explain the meaning of the term “Universality.”
2. Identify the four stages of group development and describe the features of each; (initial, transition, working, final) as well as, the counselor’s tasks at each stage.
3. Define group process.
4. Identify and explain the three processes (compliance, identification, internalization), which individuals must experience in order to benefit from groups.
5. Describe the counselor’s role in assisting clients to work through the three processes identified above.

6. Identify and explain three styles of leadership (authoritarian, democratic, laissez faire).
7. Identify three leadership functions (emotional stimulation, meaning attribution, executive function).
8. Identify and demonstrate facilitation techniques used by group leaders (group communication, keeping a “here and now focus,” questioning individual members, role-playing, seeking insight, seeking commonality, self-disclosure.)
9. Give examples of leader interventions in response to urgent/critical group issues (e.g. focus attention on group process, encouraging “here and now focus,” addressing the groups difficulties, etc.)
10. Develop skills for dealing effectively with problematic group members (silent client, boring client, monopolizing client, self-righteous client, hostile client.)
11. Identify and explain the Curative Factors found in group counseling.
12. Competency 88: Describe, select, and appropriately use strategies from accepted and culturally appropriate models for group counseling with clients with substance use disorders.
13. Competency 89: Carry out the actions necessary to form a group, including but not limited to determining group type, purpose, size, and leadership; recruiting and selecting members; establishing group goals and clarifying behavioral ground rules for participating; identifying outcomes; and determining criteria and methods for termination or graduation from the group.
14. Competency 90: Facilitate the entry of new members and the transition of exiting members.
15. Competency 91: Facilitate group growth within the established ground rules and movement toward group and individual goals by using methods consistent with group type.
16. Competency 92: Understand the concepts of process and content, and shift the focus of the group when such a shift will help the group move toward its goals.
17. Competency 93: Describe and summarize the client’s behavior within the group to document the client’s progress and identify needs and issues that may require a modification in the treatment plan.

#### C206: Family Counseling

1. Explain how SUD affect the family collectively, as well as, each member.
2. Identify the rules in SUD affected families and per Black & Wegscheider (don’t talk, don’t feel, trust)
3. Identify family roles & their features as described by Wegscheider (the “addict”, “enabler”, “hero”, scapegoat”, “lost child”, “mascot”) and the roles as described by Black (“the adjuster”, “placate”,” acting out child”.)
4. Distinguish between inter-Use Disorder, co-Use Disorder, and Use Disorder.
5. Distinguish between performing A & D counseling with families and performing family therapy.
6. Define intervention and explain the intervention process.
7. Become familiar with family related support groups and community-based service providers for families.
8. Competency 81: Recognize how, when, and why to involve the client’s significant others in enhancing or supporting the treatment plan.
9. Describe appropriate screening tools to be used with women of child bearing age regarding alcohol use during pregnancy, such as the 4 P’s +(Parents, Partner, Past, Prior)
10. Evaluate appropriate referral and treatment options for women who are pregnant and drinking;
11. Describe the salient characteristics of Fetal Alcohol Syndrome and Fetal Alcohol Spectrum Disorders across the lifespan;
12. Comprehend the lifelong primary and secondary characteristics associated with FASD (Fetal Alcohol Spectrum Disorder)
13. Recognize the need for multidisciplinary assessment to determine appropriate services.
14. Evaluate appropriate treatment options for individuals with FASD.

#### C404: Sociocultural Client Education

1. Develop an understanding of the following various characteristics of: a. Major cultural groups represented in client populations, including but not limited to, African Americans, Asian Americans, Hispanic/Latino Americans, and Native Americans. b. Special populations: - Disabilities -Sexual orientation- Female- Youth- Gangs- Senior, etc.
2. Competency 2: Recognize the social, political, economic, and cultural context within which addiction and substance abuse exist, including risk and resiliency factors that characterize individuals and groups and their living environments.
3. Competency 12: Provide treatment services appropriate to the personal and cultural identity and language of the client.

#### C405 Addiction Recovery & Psychological Family Education

1. Define co-dependency and the roles commonly assumed by families affected by SUD
2. Educate the family about the benefit of self-help groups etc.
3. Educate the family about the rules commonly found in the addictive family system.
4. Educate the family about their own personal recovery, as well as, the SUD family member.
5. When appropriate, describe to the family features of co-dependency.
6. Help the family understand in the recovery process.
7. Competency 94: Understand the characteristics and dynamics of families, couples, and significant others affected by substance use.
8. Competency 95: Be familiar with and appropriately use models of diagnosis and intervention for families, couples, and significant others, including extended, kinship, or tribal family structures.
9. Competency 96: Facilitate the engagement of selected members of the family or significant others in the treatment and recovery process.
10. Competency 97: Assist families, couples, and significant others in understanding the interaction between the family system and substance use behaviors.
11. Competency 98: Assist families, couples, and significant others in adopting strategies and behaviors that sustain recovery and maintain healthy relationships.

#### C406: Biomedical/Sociological Family Education

1. Describe cultural traditions of various subgroups.
2. Identify barriers to recovery in various cultures.
3. Identify social institutions that can support the recovery process.
4. Describe specific behaviors that counselors should include or avoid when interacting with families.
5. Describe to family members the basics of pharmacology of substance use disorders at a level that the family is able to understand.
6. Competency 102: Describe warning signs, symptoms, and the course of substance use disorders.
7. Competency 103: Describe how substance use disorders affect families and concerned others.
8. Competency 104: Describe the continuum of care and resources available to the family and concerned others.
9. Competency 105: Describe principles and philosophy of prevention, treatment, and recovery.
10. Competency 106: Understand and describe the health and behavior problems related to substance use, including transmission and prevention of HIV/AIDS, tuberculosis, sexually transmitted diseases, hepatitis C, and other infectious diseases.

#### C503: Cultural Competency (3 hours)



1. Recognize the importance of individual differences by gaining knowledge about personality, cultures, lifestyles, and other factors influencing client behavior in order to provide services that are sensitive to the uniqueness of the individual.
2. Examine their own attitudes and behaviors relative to the special populations and cultural groups with whom they may become professionally involved.
3. Identify and utilize techniques pertinent to various cultural groups and populations.
4. Competency 2: Recognize the social, political, economic, and cultural context within which addiction and substance abuse exist, including risk and resiliency factors that characterize individuals and groups and their living environments.
5. Competency 18: Understand diverse cultures, and incorporate the relevant needs of culturally diverse groups, as well as people with disabilities, into clinical practice.
6. Competency 118: Recognize the importance of individual differences that influence client behavior, and apply this understanding to clinical practice

## **ACT Certificate Program**

### **Threaded Discussion – Philosophy & Grading Rubric: General Guidelines for Participating in the Threaded Discussions**

**(Adopted from Rutgers University Online Learning Resources)**

Threaded discussions are the way we participate in the online portion of the class, so it is important that you post thoughtful messages that move the conversation forward in some way. "Yeah, I agree," and "Me, too" are not acceptable postings and will not earn any points. After the due date for each discussion, you will be graded on your overall participation in that discussion thread.

Your posts should show that you have read the material in the text, articles, and/or materials viewed in other forms such as pod-casts or websites. You should NOT repeat what you just read or viewed; you should engage with the material using your critical thinking skills, analyzing and interpreting it, and taking the information a step further. Your posts should be grammatically clear so that everyone will understand your point. It is not a formal writing forum, but it is not Facebook either.

Students' individual grades will be provided in Canvas and/or the gradebook. Students will not receive grades for all posts but should expect to receive a grade with each threaded discussion.

#### **ACT Online Protocol**

The following protocol is designed to create an online learning environment that respects individual difference and our academic environment while creating space for vibrant, productive dialogue.

Students will actively participate and complete all assigned work according to the course timeline and instructions. Active participation is demonstrated through multiple postings in a given week. Initial postings are completed early in the week and follow up posts are timely.

Posts should demonstrate the ability to relate concepts to professional and, where appropriate, personal experiences.

Students will conduct themselves in a manner that facilitates learning in the online environment. Discussion with varying views is encouraged – lack of respect for fellow students is not. Deliberately hostile, insulting, inflammatory, obscene, threatening, harassing or otherwise offensive messages, postings, pictures, or other forms of communication are unprofessional and will result in loss of credit for assignment.

Students will use standard English, as this is an academic exercise, not texting or Facebook. Students should record thoughts in a concise, coherent, and accurate way. Students are encouraged to adopt a format that is consistent with expectations of academic assignments and/or recording of case notes.

Students may not discuss private issues about the course via the threaded discussions. Questions and concerns about the course content, assignments, due dates, etc. should be posted in the appropriate e-College forum. For private course issues such as grades, contact the instructor directly and privately.

Students are responsible for their own learning. If a participant is unable to login, receive emails, access lessons and/or complete assignments, contact the Canvas helpdesk.

Students may not engage in plagiarism. Submitting all or part of another's work as one's own in an academic exercise, including unauthorized collaboration with other participants, is not allowed. Quotes with appropriate references and original interpretations are acceptable and encouraged.

Threaded Discussion Grading Rubric									
Score of 10	9	8	7	6	5	4	3	2	1
<p>Student responds to each discussion thread question/presentation/report with an original response. When applicable, student responds to every question posed about own presentation or report, as well as to multiple classmates' comments during the designated period. Responses are distributed across discussion period. All online protocols are followed.</p> <p>-----</p> <p>Student demonstrates excellence in grasping key concepts, critiques work of others, stimulates discussion, provides sample citations for support of opinions, and readily offers new interpretations of discussion material</p>	<p>Student responds to each discussion thread question/presentation/report with an original response. When applicable, student responds to every question posed about own presentation or report, as well as to some classmates' comments during the designated period. Posts are distributed throughout the discussion period. Most online protocols are followed.</p> <p>-----</p> <p>Student shows evidence of understanding major concepts, occasionally offers divergent viewpoint or challenge, shows some academic/theoretical backing in support for opinions.</p>	<p>Student responds to some discussion thread questions/presentations/reports with an original response. When applicable, student responds to most questions posed about own presentation or report, as well as to some classmates' comments during the designated period. Posts are distributed one or two times during the discussion period. Some online protocols are followed.</p> <p>-----</p> <p>Students provides evidence of understanding most but not all major concepts, infrequently will offer a divergent viewpoint or challenge, shows limited academic/theoretical backing in support for opinions.</p>	<p>Student responds to a few, but not all discussion thread questions/presentations/reports with an original response. When applicable, student responds to some questions posed about own presentation or report, as well as to a few classmates' comments during the designated period. Posts are distributed one or two times during the discussion period. Few online protocols are followed.</p> <p>-----</p> <p>Student has shallow grasp of the material, rarely takes a stand on issues, and offers inadequate levels of academic/theoretical backing in support for opinions.</p>	<p>Student responds to one or two discussion thread questions/presentations/reports with an original response. When applicable, student responds to very few questions posed about own presentation or report, as well as to a few classmates' comments. Student posts one time in a designated discussion period. Very few online protocols are followed OR posts create a negative learning environment.</p> <p>-----</p> <p>Student shows very limited or no significant understanding of material, and offers no support for opinions.</p> <p><b>No posts = 0 points!</b></p>					

## Mutual-Support Meeting Report

Meeting name:

Location (include county):

Day and time held:

Type of meeting:

Demographics:

Topic and theme of the meeting:

What do you hear from the speaker or speakers that fit within the process of the transtheoretical model of change (e.g., stages of readiness, markers of change, decisional balance, personality characteristics, mental health issues, self-efficacy, cognitive experiential phase and behavioral process of change):

What demographic group of people or specific type of person or personality do you think would benefit most from attending this meeting? Why?

Who do you feel would benefit *least* from attending this meeting? Why?

Did the meeting touch on spiritual components of the program? In what ways? (Please provide specific examples).

## Grading Rubric for Special Populations Presentation

Note: Graded on a 100 potential points scale

Area	Meets Expectations		Somewhat Meets Expectations		Does Not Meet Expectations		Points Received	Points Earned	Points Possible
	5	4	3	1					
<b>Presentation style</b>	Engages audience, articulate, clear, comfortable with the material (does not read), finishes within the time limit		Occasional drift in focus, infrequently speaks too quickly or in monotone, finishes close to the time limit.		Speaks in an unclear manner or reads word-for-word, goes over the time limit or is excessively brief.		2x__		10
<b>Format</b>	Slides are clear, easy to read, title and reference page are included, facts are cited appropriately. Slides embody all PPT guidelines, and contain no errors in grammar, spelling, or punctuation.		Slides have occasional mistakes or are difficult to read at times. Infrequent spelling, grammar, or punctuation errors included. Slides follow some, but not all, PPT guidelines. Citing facts are attempted but not complete.		Missing title or reference page, slides are unclear, difficult to read, or contain multiple errors in spelling, grammar, or punctuation. Slides do not follow PPT guidelines. Facts not cited or cited inaccurately.		2x__		10
<b>Organization</b>	Information is logically ordered, transitions from one topic to the next are logical and smooth.		Presentation lacks a well-developed plan and order in presenting information. Transitions and sequencing from one topic to another are attempted but need improvement.		Presentation lacks organization, and is consequently difficult to understand. Sequencing and transitions need serious improvement.		2x__		10
<b>Substance</b>	Presentation thoroughly addresses all elements of the assignment, covers all pertinent concepts, and focuses on screening, assessment, and diagnosis of the special population. Facts are accurate, relevant, and supported by credible sources.		Presentation addresses the assignment and contains references to some basic concepts but omits others. Presenter discusses screening, assessment, and diagnosis in the special population, but in a cursory fashion. Facts are accurate but not always cited from the literature.		Presentation does not focus on the assignment and contains minimal references to basic concepts. Presenter discusses the special population, but little about screening, assessment, and diagnosis. Facts are inaccurate and/or not cited from the literature.		5x__		25
<b>Application</b>	Content exhibits extensive clinical insight and chooses rigorous and relevant scholarly work to support the choices made. Concepts		Content shows some clinical understanding and a willingness to examine a range of relevant issues. Concepts learned in the course are		Content shows little clinical understanding, is superficial, and is narrow in scope. Little attempt is made to apply the		9x__		45

<p>learned in the course are thoroughly integrated into discussion. Competing philosophies or opinions are well presented in an even-handed manner. A broad yet deep understanding of the range of issues relevant to the population, screening, assessment, and diagnosis is evident.</p>	<p>somewhat integrated into discussion. Competing philosophies or opinions are presented in a cursory or uneven manner. A beginning understanding of the range of pertinent issues related to the population, screening, assessment, and diagnosis is evident.</p>	<p>concepts learned in the course. Competing philosophies or opinions are unmentioned. An inadequate understanding of the range of issues related to the population, screening, assessment, and diagnosis is evident</p>				
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