- Articulate how an individual's social location; inclusive of their cultural customs and world views inform their experiences with substance use.
- Practice cultural humility when supporting clients with substance use challenges which includes a lifelong process of openness, effort, as and exploring/learning from

 Select appropriate intervention strategies based on the assessment, research knowledge, and values and preferences of clients and constituencies.

Competency #8: Intervene with Individuals, Families, Graps, 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 commuties. Social workers are knowledgeable about evidenformed interventions to achieve the goals of clients and constituencies, including individuals, families, groups, organizations, and communities. Social workers understand theories of human bethavior a 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 formed interventions to achieve emit and constituency goals. Social workers value the importance of interprofessional teamwork and communication in interventions, recognizing that beneficial outcomes Students completing this course will:

- Critically choose and implement interventions to achieve practice goals and enhance capacities of clients and constituencies;
- Apply knowledge of human behavior and the social environment, piersonvironment, and other multidisciplinary theoretical frameworks in interventions with clients and constituecies;
- Use interprofessional collaboration as appropriate to achieve beneficial practice outcomes;
- Negotiate, mediate, and advocate with and on behalf of diverse clients and constituencies; and
- Facilitate effective transitions and endings that advance mutually agmegdals.

II. LEARNING OBJECTIVES

Upon completion of the course, students will understand and demonstrate the following:

 Crisis ManagemenBoth life-threatening and nolife-threatening crisis situations and impact on recoverycrisis situations/incidents that need an immediate response and how to triage methods to respond to client and/or family in crisisieseernv(p)-4 prnnessoci ithovdere andncte itd(r)3 (a)4 owl s tmisiilizagrsFsFtuwi(o)2 noec62 (th)2 e

- Patient, Family and Community Education and PreventResentation utilizing cultural and age appropriate training techniques that address how to provide relevant information about substance use disorders and related problems to patienties, & communities to encourage wellness and increase understanding of addictesentation and training techniques that address and support substance use disorder prevention, treatment, and the recovery process.
- Compulsive Gambling and Sexual Compulsivity: Assessment and Treatment Issues Knowledge of the connection of the theories and models of Substance Use Disorder and Gambling prevention to current best practices, including OASAS' Risk & Protection framework, SAMHSA's Strategic Prevention Framework, model programs, and environmental strategies. Assessment, Evaluation, diagnostic and treatment considerations for process addictions.

Relapse PreventiorAssessing a client's risk factors for recurrence of symptoms/relapse and need forrecovery supports sisting the client ipre-empting the recurrence of symptoms/relapse processollaboratively developing a relapse prevention plan; understanding harm reduction models and normalizing relapse grostic; The dynamics of recurrence for symptoms/relapse.

 Clinical management of Relapse: Residual effects of substance use as it affects recurrence of symptoms/relaps@ecognizing client manifestations of recurrence of symptoms/relapse; Educating the client in understanding their individual recurrence of symptoms/relapse signs and symptomsAssisting the client in intervening in the recurrence of symptoms/relapse process.

Recovery and recurrence of symptoms/relapse process to include prevention planning.

• Case Studies in Goccuring Disorders Critical evaluation and deconstruction of complex cases involving multiple diagness including neurocognitive issues; developmental issues; personality disorders; multiple addictions (eg. Alcohol and compulsive gambring)d and psychosis.

The educational goals of this course align with the Credentialed Alcoholism and Substance Abuse Counselor (CASAC) 350 standardized education and training curriculum for New YorkTStiate

Assignment

library subscription services, or are **figee**vailable as 'public domina', for example government websites or the occasional YouTube. Your computer must have a PDF reader and also be able to manage documents in Microsoft Woltdbu will also need a video media player on your computer for lectures.

Additional optionalreading and audio/video will be posted by the profe**fsoon** time to time Also, anonymized case material (asses**ts**)efrom current and recent clinical treatment will be posted. All assigned reading material will be discussed**lars**s or in online forum,**s**ully online discussion are not real time discussions but take place within a brief window of time (72+ hours). As

asynchronous communication is employed in online learning. It is very helpful to communicate in **tis** way, because students have plenty of time to formulate thoughts. By communicating [this way] students are able to respond in detail to a question or topic that they might have answered incompletely in a-**time** conversation. This time lag in communic**a** in helps students internalize information by giving them timesearch certain ideas(emphasis added) and extra time for contemplation detail to think more before you 'speak.'

The professor poses a series of provocative questions and dilemmas to start, often relying on case vignettes and case studies; students formulate written posts to an open discussion board, and are keenly aware that not only the professor, but all members of the class (peers) will be carefully reading and scrutinizing evening they write, and this dynamic tends to elicit highality postings and optimal learning.

Students post an original contribution to the discussion within 72 hours of it opening and 3 briefer responses to others within the next 72 hours. Late posts lose grade points. The professor replies to each initial post by students and occasionally to reply posts. This is in writing and occasionally a student post may even elicit a brief video response lecture from the professor. As you decide who and what to espond to you will skim what others have contributed, sometimes reading their entire post, then select where to respond.

Grades are determined when posts are complete. In order tthe discussion (and earn the top grade) students must be and/or generate most responses from others.

A grading rubric will be applied to your discussion posts each class and includes the following criteria:

- Ideas, Arguments, & Analysis
- Connection to Course Materials
- Contribution to Learning Community
- Writing Quality

2) Quizzes/Tests: 40% of grade – Quizzes are open book and you may use the materials assigned to study. They are time limited though, and you won' have much time to look things up. They run between 10 and 30 questions. Quizzes and tests maybretæken outside of the time frame specified; there is usually a 48 hour window in which they are open and you adveuts to complete once started.

The tests are designed specifically to prepare you for testing to become a Credentialed Alcohol and Drug Abuse Counselor (CASAC) in NY and other states; they are also designed to prepare you to test and become a Licensed Clinical Social Worker (LCSW).

Schedule of Discussions and Quizzes

Here are the course schedule and assignments with deadlines in fortadat. The deadline for Discussion Board is for your initial post; you have the rest of the week for replies to others. Watch 'Announcements' for possible deadline changes

Students are provided

Policy Statement on NoDiscrimination, Ant-Harassment, and Complaint procedures can be found here The University's Computer Guidelinesche foundhere.

XII. COURSE SCHEDULE

RequiredReading and Schedule of Activities

All deadlines are in Canvas under the "assignments" tab. The deadline for Discussion Board is for your initial post; you have the rest of the week for replies to others. Watch 'Announsefoepbssible deadline changes.

MODULES

Module 0: Getting started

Complete this module in the Canvas Learning Management System (LMS) prior to starting Module 1. This precourse module welcomes you; tells you how to succeed in this course; how to access technology support; provides some online learning resources and dispetiestic quette.

There is a link to an ungraded discussion board where you will add some background information to share with all. Very importantly: there is a link to a quizick/provides the definition of plagiarism; you must answer one question indicating if you read and understand this (yes()nor).rStudents not clearly understanding plagiarism cannot participate; students plagiarizing will be failed referred to the definitional consequence.

Module 1: Crisis Management in SUD Counseling

<u>Overview</u> Individuals suffering from addictive disorders often face botht**life**atening and non life-threatening crisis situations which imp**act**overy Crisis situations/incidents need an immediate response and will look at how to triagefocusing specifically on ethods for responding to a client and/or family in crisiAlso covered are emergency procedures associated with overdose and acute withdrawal symptoms; utilizing crisis situations to facilitate the recovery process.

Anticipated Outcomes our knowledge, understanding and practical ability as a professional social worker with substance use disordered clients undergoing crisis will be enhanced by this module. Your principles and standards of behavior along with judgment of what is important will be challenged and developed. Crisis stresses therapeutic boundaries and managing this pressure will be enhanced.

<u>Required ReadingsAll resources here may be linked to this through the Canvas LMS. Please read</u> this material in the order it is presented in the Canvas.LMS

Week 1

Link: Webinar. Counselor Toolbox Episode 212: Principles of Crisis Intervention (59 minutes)

Define crisis; identify the 6 basic threats and how they relate to crisis; discuss characteristics of crisis; examine cultural influences in behaviors; explore th SAFERR model; identify 10 principles of crisis intervention

• SAMHSA Crisis Counseling and Assistance Training Program (CCP)

- SAMHSA Suicide Assessment Fiveter Evaluation and Triage (SAFIE)
- Facing Addiction in America: The Surgeon General's Report on Alcohol, Drugs, and Health [Internet]. https://www.ncbi.nlm.nih.gov/books/NBK424859/ Pay particularly close attention to the material on emergency room responses and overdosepisode patient management.
- Video lecture: Onical crisis assessment in theateworld: Dr. Tim Conley

Week 2

- Schmidt, C. S., Schulte, B., Seo, H. N., Kuhn, S., A, O. D., Kriston, L., Reimer, J. (2016). Metaanalysis on the effectiveness of alcohol screening with brief interventions for patients in emergency care settings. Addicti11(5), 783794.
- Tripodi, S.J., Springer, D.W., Corcoran, K. (2017) Determinants of Substance Abuse among Incarcerated Adolescents: Implications for Brief Treatment and Crisis Intervention. Portland State University PDXScholar <u>https://pdxscholar.library.pdx.edu/cgi/viewcontent.cgi?article=1010&context=</u> socwork_fac
- Agerwala, S. M., & McCancKatz, E. F. (2012)Integrating screening, brief intervention, and referral to treatment (SBIRT) into clinical practice settings: A brief review. Journal of Psychoactive Drugs, 44(4), **307**.
- Hankin, A., Haley, L., Baugher, A., Colbert, K., & Houry, D. (2015). Kiosk versus in-person screening for alcohol and drug use in the emergency department: patient preferences and disclosure. Western Journal of Emergency Media (20);2260228.
- 240. Mello, M. J., Longabaugh, R., Baird, J., Nirenberg, T., & Woolard, R. (2008). DIAL: A telephone brief intervention for highsk alcohol use with injured emergency department patients. Annals of Emergency Medic (6), 7535764.

Explore Further See Canvas Course

Module 2: Resiliency, SelfCare and Employee Assistance Programs (EAP) for Counselors

Overview In this Modules we will be looking at

- Values Students will think critically about the importance of **spelé**servation for client well-being, learning that to care fone's self first is critical for being able to care for their clients
- Knowledge Identification of known effective mechanismor preventing and when needed coping/esponding to symptoms of burnout in self and peers. Students will give examples of common pitfalls and frequently used adaptive responses
- Skills and Abilities: Students will be able to develop a setting plan designed to explore how to relate to clients and organizations who operate more from ideology than science. Will also gain the ability to work with the facts they have in mind, accepting that all knowledge is not always readily available.

Activities/AssignmentsForva

and a Research Agenda.

<u>Activities/Assignment</u>s or this modules you are to participate in the discussion board, complete th assigned readings and engage in the classroom discussion.

<u>Required ReadingsAll resource here may be linked to this through the Canvas LMS. Please read</u> this material in the order it is presented in the Canvas.LMS

Week Five

- Benningfield, M. M., Riggs, P., & Stephan, S. H. (2015). The role of schools in substance useprevention and intervention. Child and Adolescent Psychiatric Clinics of North America, 24(2), 291303.
- Wheeler, E., Davidson, P. J., Jones, T. S., & Irwin, K. S. (2012). Community opioid overdose prevention programs providing naloxeduanited States, 2010. MMWR, (6), 101-105.
- Gottheil, E., Sterling, R. C., & Weinstein, S. P. (1997). Outreach engagement efforts: Are they worth the effort? The American Joarof Drug and Alcohol Abuş@3(1), 6166.
- Medina Mora, M.E. (2005). Prevention of substance abuse: a brief overview. Forum: Prevention of Substance Abuse Worldwide Psychiatry 4(1) 2530
- Online video Training: Learning Thursdays: What is the OASAS Prevention Framework and Why is it so Important?
 - https://www.youtube.com/watch?v=iloxwKXHXcU&feature=youtu.be
- National Council for Behavioral Health Mental Health First Aid: Substance Use, Misuse, and Addiction Prevention.

This reading is loaded. Pay particular attention to "Defining the Seven Strategies for Community Change."

Week Six

- Substance Abuse and Mental Health Services Administration, Focus on Prevention. HHS Publication No. (SMA) 10–4120. Rockville, MD: Center for Substance Abuse Prevention, Substance Abuse and Mental Health Services Administration, Revised 2017.
- SAMHSA: Counselor's Family Education Manual: MatIntensive Outpatient Treatment for People with Stimulant Use Disorders.

You will be responsible for securing specific material from this publication for use with the class this week.

SAMHSA: Substance Abuse and Family Therapy
<u>https://www.ncbi.nlm.nih.gov/books/NBK642</u>69/

PowerPoint/Video LectureSee Canvas

 Online video Training: Learning Thursdays: What is the OASAS Preventionework and Why is it so Important? https://www.youtube.com/watch?v=iloxwKXHXcU&feature=youtu.be

Discussion Questions and Ideasespond to each discussion **qioes** topic with a meaningful and thoughtful response. Your initial post should have **260**-words, and it is due by the due date listed.

Week 8

- Miller et al. (2018). Electronic Book. The ASAM Principles of Addiction Medicine (6th ed). Philadelphia, PA: Wolters Kluwer Section 5 Special Issues, ChapteProblematic Sexual Behaviors and "Sexual Addiction"
- Bancroft, J., & Vukadinovic, Z. (2004). Sexual addiction, use compulsivity, sexual impulsivity, or what? Toward a theoretical model. Journal of Sex Research, 225234.
- Barrilleaux, J.C. (2016). Sexual addiction: Definitions and interventions. Journal of Social Work Practice in the Addiction\$6(4), 421438.
- Levine, M.P., Troiden, R.R. (1988). The myth of sexual compulsivity. The Journal of Sex Research25(3), 347363.
- Woody, J.D. (2011). Sexual addiction/hypersexuality and the DSM: Update and practice guidance for social workers. Journal of Social Worked to the Addictions, 11(4), 301-332.

Clinical Documents for Discussion:

Educating the client in understanding their individual recurrence of symptoms/relapse signs and symptoms

<u>Required ReadingsAll resource here may be linked to this through</u> the second this material in the order it is presented in the Canvas.LMS

Week 9

- Scott, C.K., Foss, M.A., Dennis, M.L. (2005) Pathways in The Relapse Treatment Recovery Cycle Over 3 Years. Journal of substance abuse treat(28))563S72.
- •

Spring 202

<u>Discussion Questions and Id</u>e Respond to each discussion question/topic with a meaningful and thoughtful response. Your initial post should have **260**-words, and it is due by the due date listed.

Explore Further

• Matto. H.C., (2015). Biobehavioral Response Redirection: Innovations to Activate Personalized Recovery Cues and Decrease Relapsed Riskal of Social Work Practice in the Addictions, 5:4, 450453, DOI: 10.1080/1533256X.2015.1091250

Module 7: Case Studies in COccurring Disorders

<u>Overview</u> For this final module we will apply a case study method for integrating what has been learned throughout the 3 courses series. In addition to a case study presented by the professor which exemplifies much of what has been learned, students will follow guidelines to share parts of case studies they have generated themselves. There will be critical evaluation and deconstruction of complex cases involving multiple diagnoses including neurocognitive issues; developmental issues; personality disorders; multiple addictions (eg. Alcohol and compulsive gambling); mood and psychosis.

<u>Anticipated Outcome</u>students will advance their own development as practitioners working with complex cases with multiple iagnoses. Students ability to apply the values, knowledge and skill acquired in all three courses on addictions will be applied as cases

- Values: This module will challenge students to see how all disorders must be treated simultaneously(mental illnessand all SUD's) and to advance the values of integrated treatment planning and client care.
- Knowledge Students will identify effective methods of constructing and deconstructing case material for sharing with colleagues for reviewso, students will recognize common elements of integrated treatment plans.
- Skills and Abilities: Skill to actually present a case forepreeview and critique; ability to accept constructive feedback on practice.

Spring 2023

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