

UNIVERSITY OF TENNESSEE
COLLEGE OF SOCIAL WORK

**SW-540: General Topics in Social Work: Substance Abuse
Policy and Practice**
Course Outline
Fall 2004

Tuesdays 9:00-12:00

Instructor: Samuel A. MacMaster, Ph.D.
Phone – 256-1885 ext. 121/ E-mail— smacmast@utk.edu

Methods to Attain Objectives

The primary learning format will be lectures, classroom exercises, and activities, which involve **all students as active learners**. Class lectures and exercises are based on the understanding that readings assigned for that topic have been completed prior to class.

Assigned Texts

McNeece, C. A. & DiNitto, D. M. (2004). Chemical dependency: A systems approach. Englewood Cliffs, NJ: Prentice-Hall.

van Wormer, K., & Davis D.R. (2003) Addiction Treatment: A Strengths Perspective Wadsworth.

COURSE OUTLINE-TENTATIVE
(All guest speakers' times are tentative)

- 8-24 **INTRODUCTION TO SUBSTANCE ABUSE & THE BIOLOGICAL BASIS OF ADDICTION**
Addiction counseling competencies: The knowledge, skills, and attitudes of professional practice.
<http://www.treatment.org/taps/tap21/TAP21Toc.html>
Definitions and Epidemiology of Alcoholism and Drug Addiction
The Etiology of Addiction
Becoming Addicted
“This is your brain, this is your brain on drugs”
- 8-31 **MODELS FOR CONCEPTUALIZING SUBSTANCE ABUSE: APPROACHES TO POLICY AND PRACTICE**
McNeece & DiNitto Text Chapters 1-3:
Miller & Kurtz, 1991

Models of alcoholism used in treatment: Contrasting AA and other perspectives with which it is often confused

9-7

**MODELS FOR CONCEPTUALIZING SUBSTANCE ABUSE:
HARM REDUCTION APPROACH TO POLICY AND PRACTICE**

Des Jarlais, 1995;

Harm reduction: a framework for incorporating science into drug policy

Drucker, 1995;

Harm reduction: a public health strategy

MacMaster, 2004;

Harm Reduction: Moving beyond an abstinence-only orientation for social workers working in substance abuse.

McCafferty, 2000

Decriminalizing drugs is wrong: Why wreck more lives with drug abuse?

Guest Speaker-Joyce Perkins, Methadone Outreach Recruitment Retention & Enhancement; and Davidson County Harm Reduction Program

9-14

BEING AN AGENT OF INDIVIDUAL CHANGE: THE CLINICAL PROCESS

Prochaska, DiClemente & Norcross, 1992;

In search of how people change

Miller & Rollnick, 1992

Motivational interviewing: Preparing people to change addictive behavior.

Miller, 1999

Enhancing motivation for change in substance abuse treatment

9-21

BEING AN AGENT OF GROUP LEVEL CHANGE: ISSUES OF CULTURAL COMPETENCY-RACE/ETHNICITY & GENDER IN POLICY AND PRACTICE

McNeece & DiNitto Text Chapters 5, 11 and 15

Gender and Drugs: Fact, Fiction and Unanswered Questions
Ethnicity, Culture and Substance Abuse

Screening, Diagnosis, Assessment and Referral

Burston, Jones and Roberson-Saunders, 1995

Drug Use and African Americans: Myths and Reality

McNeece & DiNitto Text; Chapter 16;

Chemical Dependency Current Issues and Future Prospects

[The Hay Group Report](#)

<http://www.asam.org/ppol/managedcare.htm>

ONDCP National Drug Control Strategy

<http://www.whitehousedrugpolicy.gov/publications/policy/ndcs01/index.html>

9-28

ISSUES OF GENDER

Discussion of Movie *28 Days*

- 10-5 **APPLICATION EXERCISE**
Individual or group experiences
- 10-12 **CLINICAL AND ORGANIZATIONAL APPROACHES: THE 12-STEP APPROACH**
McNeece & DiNitto Text Pages 151-156;
 Self Help Groups, Section in Chapter Treatment—System of Care
NA & AA texts;
Holleran and MacMaster, 2001
 Cultural Competent Practice with 12-Step Groups
Guest Speakers: TBA
MIDTERM PAPER IS DUE
- 10-19 **CLINICAL AND ORGANIZATIONAL APPROACHES: APPROACHES FOR INDIVIDUALS IMPACTED BY HIV/AIDS AND HEPATITIS-C**
Day, 2001
 Health emergency 2001: The spread of drug-related AIDS and hepatitis C among African Americans and Latinos
 <http://www.dogwoodcenter.org/2001/HE2001.html>
The Dogwood Center Website
 www.dogwoodcenter.org
Guest Speaker-Ron Crowder, Street Works
- 10-26 **CLINICAL AND ORGANIZATIONAL APPROACHES: FAMILY SYSTEMS APPROACH**
McNeece & DiNitto Text Chapter 10
 Family Systems and Chemical Dependency
- 11-2 **CLINICAL AND ORGANIZATIONAL APPROACHES: THE INTEGRATED APPROACH WITH INDIVIDUALS WITH CO-OCCURRING MENTAL HEALTH DISORDERS**
McNeece & DiNitto Text Chapter 13;
 Compounding the Problem: Substance abuse and other disabilities
Singer, Kennedy & Kola, 1998;
 A conceptual model for co-occurring mental and substance-related disorders
Ries, 1994
 Assessment and treatment of patients with coexisting mental illness and alcohol and other drug abuse.
 <http://www.health.org/govpubs/bkd134/>
Guest Speaker—Michael Cartwright & Pam Raby, Foundations

- 11-9 **CLINICAL AND ORGANIZATIONAL APPROACHES:
APPROACHES WITH ADOLESCENTS AND CHILDREN**
McNeece & DiNitto Text Chapter 9;
 Treating Chemically Dependent Adolescents and Children
CSAT materials
 Screening and assessing adolescents for substance use
 disorders.
 <http://www.health.org/govpubs/BKD306/index.htm>
 Treatment of adolescents with substance use disorders
 <http://www.health.org/govpubs/BKD307/index.htm>
Guest Speaker-Andy Finch, Community High School
- 11-16 **CLINICAL AND ORGANIZATIONAL APPROACHES:
COGNITIVE BEHAVIORAL APPROACH & RELAPSE
PREVENTION**
Carrol, 1998;
 A cognitive-behavioral approach: Treating cocaine addiction.
 <http://www.nida.nih.gov/TXManuals/CBT/CBT1.html>
McNeece & DiNitto Text Chapter 7,
 Preventing Alcohol and Drug Problems
Dimeff & Marlatt, 1995;
 Relapse prevention.
- 11-23 **CLINICAL AND ORGANIZATIONAL APPROACHES:
PREVENTION APPROACHES/SUBSTANCE ABUSE AND
OTHER DISABILITIES**
Guest Speaker—Laura Cording, Deaf and Hard of Hearing
Program Alcohol and Drug Council of Middle Tennessee
- 11-30 **CLINICAL AND ORGANIZATIONAL APPROACHES:
EXPERIENTAL THERAPIES**
Guest Speaker—Warren Brent, Private Practice Social Worker
- COURSE WRAP-UP & COURSE EVALUATIONS
FINAL PAPERS DUE**

READING LIST

Alcoholics Anonymous. (1976). Alcoholics anonymous, AA World Service: New York, NY.

Carrol, K. (1998). A cognitive-behavioral approach: Treating cocaine addiction. Washington, DC: National Institute on Drug Abuse

CSAT (1999) Screening and assessing adolescents for substance use disorders. Treatment Improvement Protocol Series 31. Washington, DC: DHHS.

CSAT (1998) Addiction counseling competencies: The knowledge, skills, and attitudes of professional practice. Treatment Assistance Publication, 21. Washington, DC: DHHS.

CSAT (1999) Treatment of adolescents with substance use disorders. Treatment Improvement Protocol Series 32. Washington, DC: DHHS.

Des Jarlais, D. (1995). Harm reduction: a framework for incorporating science into drug policy. American journal of public health, 85, 10-12.

Dimeff, L. & Marlatt, A. (1995). Relapse prevention. In R. Hester & W. Miller, (Eds.), Handbook of alcoholism treatment approaches, (pp. 176-194). Boston, MA: Allyn and Bacon.

Drucker, E. (1995). Harm reduction: a public health strategy. Current issues in public health, 1, 64-70.

Hurt, R.D., Offord, K.P., Croghan, I.T. (1996). Mortality following inpatient addictions treatment. Journal of the american medical association, 275, 1097-1103.

MacMaster, S.A. (2004). Harm Reduction: Moving beyond an abstinence-only orientation for social workers working in substance abuse. Social Work

Holleran, L., & MacMaster, S.A. (Under Review). Cultural Competent Practice with 12-Step Groups.

McNeece, C. A. & DiNitto, D. M. (1994). Chemical dependency: A systems approach. Englewood Cliffs, NJ: Prentice-Hall.

Miller, W., & Rollnick, S. (1991). Motivational interviewing: Preparing people to change addictive behavior. New York: Guilford Press.

Miller, W.R. & Kurtz, E. (1994). Models of alcoholism used in treatment: Contrasting AA and other perspectives with which it is often confused. Journal of studies on alcohol, 55, 159-166.

Narcotics Anonymous. (1988). Narcotics anonymous. Van Nuys, CA: NA World Service Office.

Philleo, J., & Brisbane, F. (1995). Cultural competence for social workers: A guide for alcohol and drug abuse professionals working with ethnic and racial communities. Washington, D.C.: DHHS.

Prochaska, J.O., DiClemente, C.C. & Norcross, J.C. (1992). In search of how people change. American psychologist, 47, 1102-1114.

Ries, R. (1994). Assessment and treatment of patients with coexisting mental illness and alcohol and other drug abuse. Washington, D.C.: DHHS.

Singer, M., Kennedy, M. & Kola, L. (1998). A conceptual model for co-occurring mental and substance-related disorders. Alcoholism treatment quarterly, 16, 75-89.

McCafferty, B. (2000). Decriminalizing drugs is wrong: Why wreck more lives with drug abuse? Reprint of an Editorial appearing in the Cincinnati Enquirer, August 6, 1998. Washington, DC: Office of National Drug Control Policy.

Day, D. (2001). Health emergency 2001: The spread of drug-related AIDS and hepatitis C among African Americans and Latinos. 28 pages. Report from the Dogwood Center

Burston, B., Jones, D., & Roberson-Saunders, P. (1995). Drug Use and African Americans: Myths and Reality. Journal of Alcohol and Drug Education, 40, 19-39.

ASSIGNMENTS & GRADING

Assignments

Assignment 1	Midterm Paper (40%)
Assignment 3	Final Proposal (60%)

Assignments are described more fully on the next page

The Grading Scale

A (93-100) Outstanding/Superior

Exceptional performance; consistently exceeds all expectations

B+ (88-92) Very Good

Student consistently meets, and occasionally exceeds, normal expectations for the course.

B (80-87) Good

Student consistently meets normal expectations for the course.

C+ (77-79) Average

There is unevenness in grasping course content. Student is inconsistent in meeting normal expectations for the course.

C (70-76) Poor

There is lack of understanding of course content. Student does not meet course expectations.

F (69-Below) Very Poor

There is a lack of attendance or incomplete assignments. Course expectations are not met.

Attendance, Deadlines & Originality of Work

Every student is expected to attend every class. If you are unable to attend class, please let me know in advance. An e-mail message or a message on my voice mail is sufficient. As a member of the class, it is your responsibility to honor deadlines. If you cannot meet a deadline, please contact me and we can discuss an alternative plan. If you miss a deadline and don't notify me in advance, you will be penalized by one grade level.

All work must be referenced in APA format. The University of Tennessee, is proud of its students' commitment to academic integrity and their pledge to abide by the Honor Statement found in [Hilltopics](#). I expect the assignments and paper that you submit to be your own intellectual work. The penalty for plagiarism in this course will be a failing grade. If you are unsure of how to reference an idea or a published work, please consult the APA stylebook or schedule time with me and we can discuss it. I am available to talk with you about your ideas, the concepts we cover in class and your projects.

Assignment 1

In the first assignment you will be asked to visit two self-help groups. After attending both meetings you are asked to write a brief paper (10 pages) based on your experiences and the pertinent literature. The paper should be divided into two sections. The first section will describe your personal experiences at the meetings; the second section will provide an analysis of twelve-step recovery groups based not only on your experiences, but also on the related self-help and professional literature. A suggested outline will be provided to you. This assignment represents 40% of your grade.

Assignment 2

You are asked in this assignment to develop a grant proposal that addresses a plan for a new and/or improved treatment program in a specific area of chemical dependency. You are free to choose the area and the type of intervention(s). Detailed guidelines will be provided on a separate instruction sheet later in the semester. You may work individually, however it is strongly recommended due to the amount of work in this assignment that you work in a group with two or three other students. This assignment represents 60% of your grade and is due the last day of class.